

**Peer Review Certification of Non-Participant in Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
2019 Cancer Prevention and Research Institute of Texas
Cancer Prevention and Research Institute of Texas Recruitment Program**

Panel: Recruitment FY19 Cycle 3

Meeting: Teleconference

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/ Initials*
	RR190012	Weidanz, Jon	The University of Texas at Arlington	Jones, Peter	Verified by GDIT telephonically	<i>JD JS</i>
	RR190017	Draetta, Gulio	The University of Texas M. D. Anderson Cancer Center	Tempero, Margaret	Verified by GDIT telephonically	<i>GM JS</i>

GDIT Approval:

Name (PRINT):

Signature:

Date:

Comments:

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

Peer Review Certification of Non-Participant in Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
2019 Cancer Prevention and Research Institute of Texas
Cancer Prevention and Research Institute of Texas Recruitment Program

Panel: Recruitment FY19 Cycle 3

Meeting: Teleconference

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/Initials*

GDIT Approval:

Name (PRINT):

Signature:

Date:

Jessica Skelton
10/11/18

Comments:

no additional
COI's

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/11/2018

Printed Name: Richard Kolodner

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: T. Curran Date: 10/11/2018

Printed Name: TOM CURRAN

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Peter Jones Date: 10/11/18

Printed Name: PETER JONES

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/11/18

Printed Name: Richard J. O'Reilly, MD

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: _____  _____ Date: Oct 11, 2018

Printed Name: Carol Prives

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Margaret Tempera Date: 10/11/18

Printed Name: Margaret Tempera

Peer Review Certification of Non-Participant in Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest

2019 Cancer Prevention and Research Institute of Texas Recruitment Program

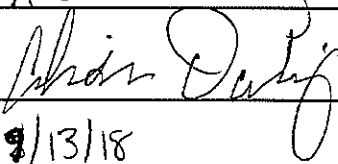
Panel: Recruitment FY19 Cycle 1-2

Meeting Type: Teleconference Review

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/Initials*
	RR190002	Johnston, Sterling	The University of Texas at Austin	Sellers, Thomas	*Reviewer not present at meeting	AMD

GDIT Approval:

Name (PRINT):	Alison Darling
Signature:	
Date:	9/13/18

Comments:

--

* A GDIT Representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application.

Procurement Sensitive Document

Do not copy or circulate without written permission.

Peer Review Certification of Non-Participant in Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest

2019 Cancer Prevention and Research Institute of Texas Recruitment Program

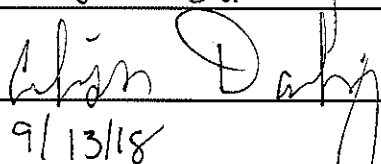
Panel: Recruitment FY19 Cycle 1-2

Meeting Type: Teleconference Review

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/Initials*

GDIT Approval:

Name (PRINT):	Alison Darling
Signature:	
Date:	9/13/18

Comments:

A/o Additional COI

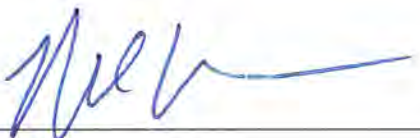
* A GDIT Representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application.

Procurement Sensitive Document

Do not copy or circulate without written permission.

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 9/13/18

Printed Name: Richard Kolodner Ph.D.

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 9/13/18

Printed Name: TOM CURRAN

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

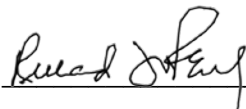
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Peter Jones Date: 09.13.2018

Printed Name: Peter A. Jones

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 9/13/18

Printed Name: Richard J. O'Reilly, MD

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: Sept 24, 2018

Printed Name: Carol Prives

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Margaret Tempera Date: 9/13/18

Printed Name: Margaret Tempera

Conflicts of Interest Disclosure
Academic Research Recruitment Cycle 18.10-18.12 Applications
(Academic Research Recruitment Cycle 19.1-19.3 Awards Announced at November 28,
2018, Oversight Committee Meeting)

The table below lists the conflicts of interest (COIs) identified by peer reviewers, Program Integration Committee (PIC) members, and Oversight Committee members on an application-by-application basis. Applications reviewed in Academic Research Recruitment Cycle 19.1-19.3 include *Recruitment of Rising Stars*; *Recruitment of Established Investigators*; and *Recruitment of First-Time, Tenure-Track Faculty Members*. All applications with at least one identified COI are listed below; applications with no COIs are not included. It should be noted that an individual is asked to identify COIs for only those applications that are to be considered by the individual at that particular stage in the review process. For example, Oversight Committee members identify COIs, if any, with only those applications that have been recommended for the grant awards by the PIC. COI information used for this table was collected by General Dynamics Information Technology (GDIT), CPRIT's third party grant administrator, and by CPRIT.

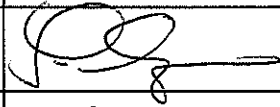
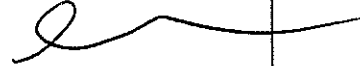
Application ID	Applicant/PI	Institution	Conflict Noted
Applications considered by the PIC and Oversight Committee			
RR190017	Gulio Draetta	The University of Texas M. D. Anderson Cancer Center	Margaret Tempero
Applications not considered by the PIC or Oversight Committee			
RR190002	Sterling Johnston	The University of Texas at Austin	Tom Sellers
RR190012	Jon Weidanz	The University of Texas at Arlington	Peter Jones

Peer Review Certification of Non-Participant in Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
2019 Cancer Prevention and Research Institute of Texas
Cancer Prevention and Research Institute of Texas Product Development Research

Panel: 19.1 Product Development Panel-1

Meeting: Onsite Meeting

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/ Initials*
10/23	DP190021	Gunter, Kurt	Cell Medica	Greenberger, Lee		AMC
10/23	DP190021	Gunter, Kurt	Cell Medica	Williams, Grant		AMC

GDIT Approval:

Name (PRINT):

Aaron Chumbris

Signature:

AAC

Date:

10-23-18

Comments:

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

Peer Review Certification of Non-Participant in Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
2019 Cancer Prevention and Research Institute of Texas
Cancer Prevention and Research Institute of Texas Product Development Research

Panel: 19.1 Product Development Panel-1

Meeting: Onsite Meeting

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/Initials*

GDIT Approval:

Name (PRINT): Aaron Chumbris

Signature: *Aaron Chumbris*

Date: 10-24-18

Comments:

No additional COIs

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

**Peer Review Certification of Non-Participant in Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
2019 Cancer Prevention and Research Institute of Texas
Cancer Prevention and Research Institute of Texas Product Development**

Panel: 19.1 Product Development Panel-1

Meeting: Teleconference Meeting

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/Initials*
9/24	DP190021	Gunter, Kurt	Cell Medica	Greenberger, Lee	Verified telephonically by GDIT	AMC
9/24	DP190021	Gunter, Kurt	Cell Medica	Williams, Grant	Verified telephonically by GDIT	AMC

GDIT Approval:

Name (PRINT):

Aaron Chumbris

Signature:

Ch Ch

Date:

9-24-18

Comments:

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

Peer Review Certification of Non-Participant in Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
2019 Cancer Prevention and Research Institute of Texas
Cancer Prevention and Research Institute of Texas Product Development

Panel: 19.1 Product Development Panel-1

Meeting: Teleconference Meeting

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/Initials*

GDIT Approval:

Name (PRINT):

Aaron Chumbris

Signature:

ACh

Date:

9-24-18

Comments:

No Additional COIs

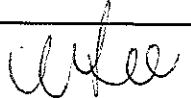
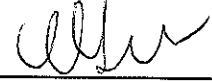
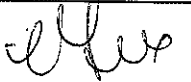
*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

**Peer Review Certification of Non-Participant in Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
2019 Cancer Prevention and Research Institute of Texas
Cancer Prevention and Research Institute of Texas Product Development Research**

Panel: 19.1 Product Development Panel-2

Meeting: Onsite Meeting

This is to certify that I was not present and did not participate in the review of the following applications:

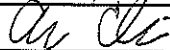
Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/ Initials*
10/25	DP190027	Ingram, Piers	Hummingbird Bioscience Pte Ltd	Lee, Vivian		AMC
10/25	DP190028	Indolfi, Laura	PanTher Therapeutics, Inc	Lee, Vivian		AMC
10/25	DP190043	Fernandez, Tania	Midissia Therapeutics	Lee, Vivian	Not discussed	AMC
10/25	DP190043	Fernandez, Tania	Midissia Therapeutics	Lyerly, H. Kim	Not discussed	AMC
10/25	DP190046	Haddach, Mustapha	Pimera, Inc.	Lee, Vivian		AMC
10/25	DP190047	Shrivastava, Sam	Venn Therapeutics, LLC	Lee, Vivian	Not discussed	AMC
10/25	DP190060	Conway, David	Terra Biological LLC	Lee, Vivian	Not discussed	AMC

GDIT Approval:

Name (PRINT):

Aaron Chumbris

Signature:



Date:

10-25-18

Comments:

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

**Peer Review Certification of Non-Participant in Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
2019 Cancer Prevention and Research Institute of Texas
Cancer Prevention and Research Institute of Texas Product Development Research**

Panel: 19.1 Product Development Panel-2

Meeting: Onsite Meeting

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/Initials*
10/26	DP190035	Rivelli, Patrick	Savran Technologies	Cipau, Gabriel	Verified telephonically by GDIT	AMC

GDIT Approval:

Name (PRINT): Aaron Chumbris

Signature: *Aaron Chumbris*

Date: 10-26-18

Comments:

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

Peer Review Certification of Non-Participant in Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
2019 Cancer Prevention and Research Institute of Texas
Cancer Prevention and Research Institute of Texas Product Development

Panel: 19.1 Product Development Panel-2

Meeting: Teleconference Meeting

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/Initials*
9/25	DP190027	Ingram, Piers	Hummingbird Bioscience Pte Ltd	Lee, Vivian	Verified telephonically by GDIT	AMC
9/25	DP190028	Indolfi, Laura	PanTher Therapeutics, Inc	Lee, Vivian	Verified telephonically by GDIT	AMC
9/25	DP190043	Fernandez, Tania	Midissia Therapeutics	Lee, Vivian	Not discussed	AMC
9/25	DP190046	Haddach, Mustapha	Pimera, Inc.	Lee, Vivian	Verified telephonically by GDIT	AMC
9/25	DP190047	Shrivastava, Sam	Venn Therapeutics, LLC	Lee, Vivian	Not discussed	AMC
9/25	DP190060	Conway, David	Terra Biological LLC	Lee, Vivian	Not discussed	AMC

GDIT Approval:

Name (PRINT):

Aaron Chumbris

Signature:

AC

Date:

9-25-18

Comments:

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

Peer Review Certification of Non-Participant in Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
2019 Cancer Prevention and Research Institute of Texas
Cancer Prevention and Research Institute of Texas Product Development

Panel: 19.1 Product Development Panel-2

Meeting: Teleconference Meeting

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/Initials*
9/25	DP190043	Fernandez, Tania	Midissia Therapeutics	Lyerly, H. Kim	Not discussed	AMC

GDIT Approval:

Name (PRINT):

Aaron Chumbris

Signature:

Aaron Chumbris

Date:

9-25-18

Comments:

--

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

**Peer Review Certification of Non-Participant in
Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
Panel: Ranking of Due Diligence Applications (Discussed at Bi-Weekly PDRC Meeting)
Meeting: Teleconference**

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/Initials*

GDIT Approval:

Name (PRINT): Katherine Weilmünster

Signature: 

Date: 1/22/19

Comments:

No additional COIs

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

**Peer Review Certification of Non-Participant in
Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
Panel: 19.1 Due Diligence
Meeting: Teleconference**

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/Initials*

GDIT Approval:

Name (PRINT): Katherine Westminster

Signature: 

Date: 1-11-19

Comments:

No Additional COIs

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

**Peer Review Certification of Non-Participant in
Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
Panel: 19.1 Due Diligence Panel-2
Meeting: Teleconference**

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/ Initials*

GDIT Approval:

Name (PRINT):

Katherine Westminster

Signature:

[Handwritten Signature]

Date:

1-14-19

Comments:

No Additional COIs

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

January 22, 2019

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

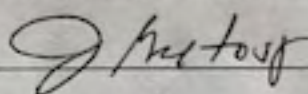
Signature:  Date: 1/24/2019

Printed Name: Roy COSAN

Ranking of Due Diligence Applications (Discussed at Bi-
Weekly PDRC Meeting)
January 22, 2019

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 1/22/19

Printed Name: McIntosh

January 22, 2019

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: _____

Date: 22 Jan '19

Printed Name: _____

David G. Shoemaker

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

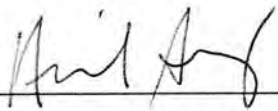
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Sandra Silberman Date: 24 January 2019

Printed Name: Sandra Silberman

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

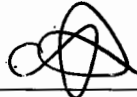
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 1/30/2019

Printed Name: NEIL SPECTOR

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 1.25.19

Printed Name: Colin Turnbull

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Kelly Bolton Date: 2/1/19

Printed Name: Kelly Bolton

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 1/11/2019

Printed Name: Renzo Canetta, MD

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Neil J Clendenin Date: 1/11/19

Printed Name: Neil J Clendenin

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

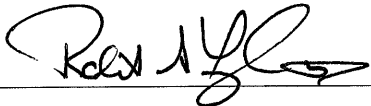
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 1/24/2019

Printed Name: Roy COSAN

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 1/24/19

Printed Name: Robert Figlin

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

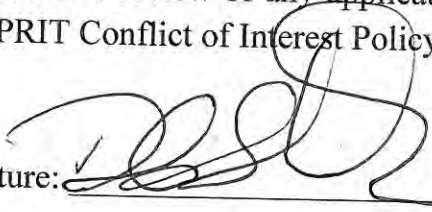
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: J. D. L. H. S. H. Date: 2/4/19

Printed Name: G. E. L. H. S. H.

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: 

Date: 14 Jan '19

Printed Name: David G. Shoemaker

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

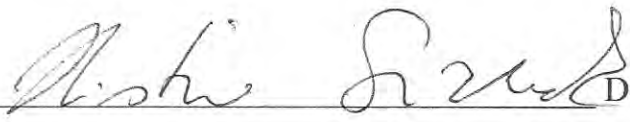
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Sandra Silberman Date: 24 January 2019

Printed Name: Sandra Silberman

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 1/12/19

Printed Name: Kristine Swiderch

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 1.25.19

Printed Name: Glin Turner

January 14, 2019

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

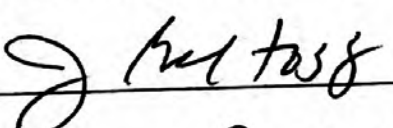
Signature:  Date: 1/24/2019

Printed Name: Roy Cosan

19.1 Due Diligence Panel-2 (DDP-2)
January 14, 2019

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 1/24/19
Printed Name: Gretta

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

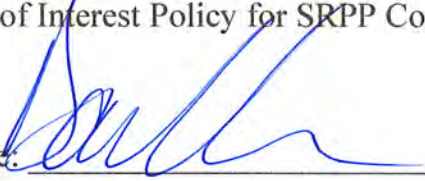
Signature:  Date: 1/23/19

Printed Name: Lee Greengard

January 14, 2019

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Date: 1/30/2019Printed Name: Daniel L. Mooradian

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: _____



Date: 24 Jan '19

Printed Name: _____

David G. Shoemaker

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

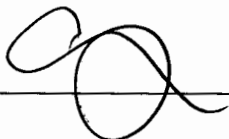
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: *Sandra Silberman* Date: 24 January 2019

Printed Name: Sandra Silberman

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 1.25.19

Printed Name: Celine Turnbull

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 1/24/2019

Printed Name: Pin Wang

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/27/18

Printed Name: Gecary

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/25/18

Printed Name: Kelly Bolton

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: Oct 24, 2018

Printed Name: Renzo Conetta

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Chitra Edwin Date: 10/24/18

Printed Name: Chitra Edwin

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Nara Ginsberg Date: 10/24/18

Printed Name: Nara Ginsberg

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

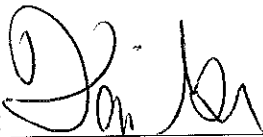
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/24/18

Printed Name: Lee Greenberger

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/24/18

Printed Name: VALERIE SUB

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: Oct. 24, 2018

Printed Name: Yueming Li

FY19.1 Product Development Panel – 1 (PDP-1)

October 23-24, 2018

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: _____

John C. McKew

Date: _____

10/25/18

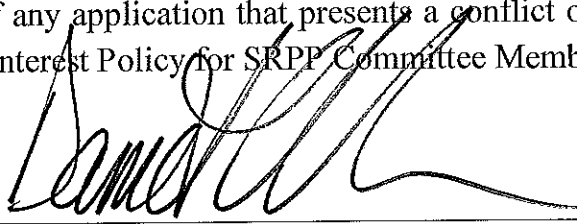
Printed Name: _____

John C. McKew

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: _____



Date: _____

²⁴
10-23-2018

AMC

Printed Name: _____

Daniel L. Mooradian

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/24/18

Printed Name: Bo E. H. Saxberg

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Neil Spector Date: OCT. 24, 2018

Printed Name: NEIL SPECTOR

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Diane Sudduth Date: 10/30/2018

Printed Name: Dr. Diane Sudduth

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

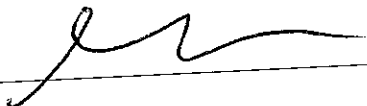
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/24/2018

Printed Name: Pin Wang

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: OCT 29, 2018

Printed Name: Graff Williams

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 9/25/18

Printed Name: G E Tushy

September 24, 2018

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/29/18

Printed Name: Kelly B. Hon

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: September 24, 2018

Printed Name: RENZO CANETTA

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Chitra Edwin Date: 9/25/18

Printed Name: Chitra Edwin

September 24, 2018

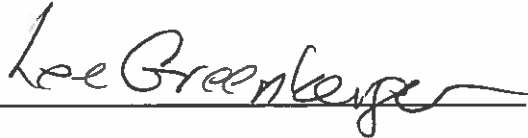
**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: _____

Date: _____

Printed Name: _____



**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Mara Ginsberg Date: 9-25-18

Printed Name: Mara Ginsberg

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.


Signature: Don Kim Date: 9/28/18

Printed Name: Vipul Singh

September 24, 2018

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 09/25/2018

Printed Name: Yueming Li

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: John C McKew Date: 9/25/18

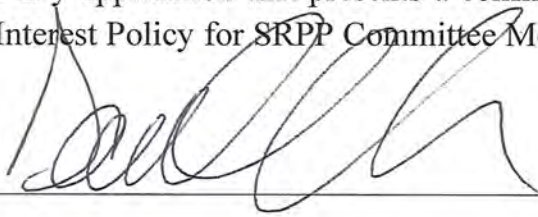
Printed Name: John C McKew

September 24, 2018

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: _____



Date: _____

10/3/2018

Printed Name: _____

Daniel L. Mooradian

September 24, 2018

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 9/27/18

Printed Name: Bo F. H. Saxberg

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.


Signature:  Date: 10/17/2018

Printed Name: Pin Wang

September 24, 2018

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

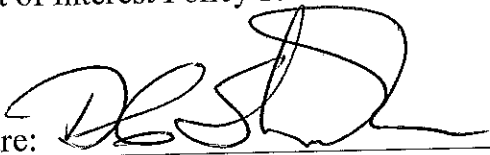
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: OCT 4, 2018

Printed Name: Grant Williams

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 26 Oct 2018

Printed Name: David G. Shoemaker

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Michelle A. Arkin Date: 10/26/18

Printed Name: Michelle Arkin

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/30/18

Printed Name: _Gabriel Cipau

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Neil J Clendeninn Date: 10/26/18

Printed Name: Neil J Clendeninn

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/26/2018

Printed Name: Roy Casan

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/26/18

Printed Name: Robert Figli

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Phyllis Gardner

_____ Date: November 1, 2018_____

Printed Name: Phyllis Gardner_____

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

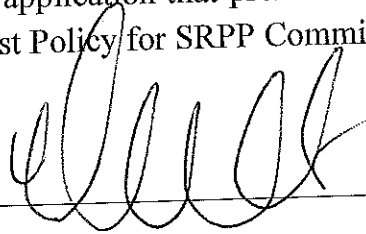
Signature: James F. Jordan Date: 10-26-18

Printed Name: James F. Jordan

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: _____



Date: _____


10/26/18

Printed Name: _____

Vivian Lee

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 11/5/2018

Printed Name: H. Kim Lyenly

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/26/18

Printed Name: MARK M. MOASSEN

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/27/18

Printed Name: GINETTE SERRANO

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Sandra Silberman Date: 10/26/18

Printed Name: Sandra Silberman

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

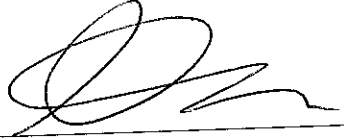
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Kristine Swiderski Date: 10/26/18

Printed Name: Kristine Swiderski

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/26/18

Printed Name: GEORGE TRAINOR

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Meryl Weinreb Date: 10/26/18

Printed Name: MERYL WEINREB

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

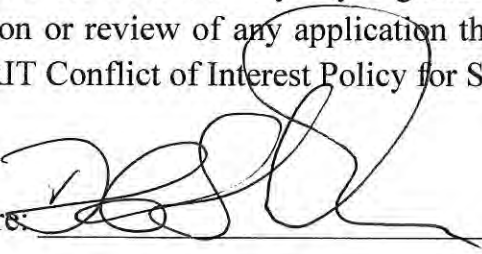
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/26/2018

Printed Name: Pan Zheng

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: 

Date: 26 Sep '18

Printed Name: David G. Shoemaker

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Michelle Arkin Date: 10/5/2018

Printed Name: Michelle Arkin

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.



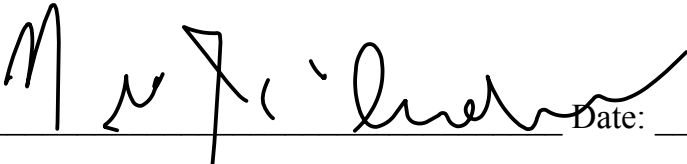
Signature: _____ Date: ____9/26/18____

Printed Name: Gabriel Cipau

September 25, 2018

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

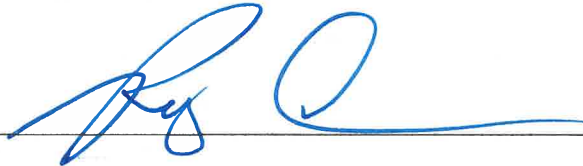
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: ____ · ____ · 10/2/18 ____

Printed Name: _____ Neil J Clendeninn _____

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 9/24/2018

Printed Name: Roy Caran

September 25, 2018

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 9/27/18

Printed Name: Robert Figlin MD.

September 25, 2018

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Phyllis Gardner Date: 10/29/2018

Printed Name: Phyllis Gardner

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

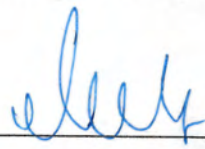
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: James F. Jordan Date: 10-4-18

Printed Name: James F. Jordan

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

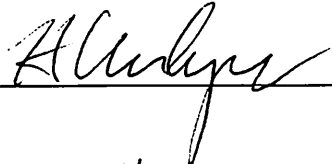
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 9/30/18

Printed Name: Vivian Lee

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/18/2018

Printed Name: H. Kim CHERU

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

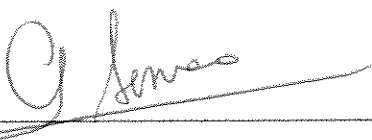
Signature: Helen Maslocka Date: 11-1-18

Printed Name: Helen MASLOCKA

September 25, 2018

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 25 SEP 2018

Printed Name: GINETTE SERRERO

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Kristine Swick Date: 9/25/18

Printed Name: Kristine Swick

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Meryl Weiner Date: 9/25/18

Printed Name: MERYL WEINER

Conflicts of Interest Disclosure
Product Development Research Applications
(Product Development Research Cycle 19.1 Awards Announced at February 21, 2019,
Oversight Committee Meeting)

The table below lists the conflicts of interest (COIs) identified by peer reviewers, Program Integration Committee (PIC) members, and Oversight Committee members on an application-by-application basis. Applications reviewed in Product Development Research Cycle 19.1 include *Company Relocation Product Development Awards*, *Seed Awards for Product Development Research*, and *Texas Company Product Development Awards*. All applications with at least one identified COI are listed below; applications with no COIs are not included. It should be noted that an individual is asked to identify COIs for only those applications that are to be considered by the individual at that particular stage in the review process. For example, Oversight Committee members identify COIs, if any, with only those applications that have been recommended for the grant awards by the PIC. COI information used for this table was collected by General Dynamics Information Technology, CPRIT's third party grant administrator, and by CPRIT.

Application ID	Applicant/PI	Institution	Conflict Noted
Applications considered by the PIC and Oversight Committee			
DP190027	Piers Ingram	Hummingbird Bioscience Pte Ltd	V. Lee
DP190021	Kurt Gunter	Cell Medica	G. Williams;L. Greenberger
Applications not considered by the PIC or Oversight Committee			
DP190028	Laura Indolfi	PanTher Therapeutics, Inc	V. Lee
DP190035	Patrick Rivelli	Savran Technologies, Inc.	G. Cipau
DP190043*	Tania Fernandez	Midissia Therapeutics	H. Lyerly;V. Lee
DP190046	Mustapha Haddach	Pimera, Inc.	V. Lee
DP190047*	Sam Shrivastava	Venn Therapeutics, LLC	V. Lee
DP190060*	David Conway	Terra Biological LLC	V. Lee

* = Not discussed

**Peer Review Certification of Non-Participant in
Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
Panel: 19.1 Prevention Panel-1
Meeting: Onsite Meeting**

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/Initials*
12/11	PP190029	Savas, Lara	The University of Texas Health Science Center at Houston	Brownson, Ross	R. Brown	AMC
12/11	PP190029	Savas, Lara	The University of Texas Health Science Center at Houston	Brandt, Heather	H. Brandt	AMC
12/11	PP190014	Schmeler, Kathleen	The University of Texas M. D. Anderson Cancer Center	Brandt, Heather	H. Brandt	AMC

GDIT Approval:

Name (PRINT):

Aaron Chumbris

Signature:

Aaron Chumbris

Date:


12-11-18

Comments:

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

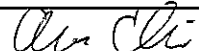
**Peer Review Certification of Non-Participant in
Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
Panel: 19.1 Prevention Panel-1
Meeting: Onsite Meeting**

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/Initials*
12/11	PPI90014	Schmeler, Kathleen	The University of Texas M.D. Anderson Cancer Center	Brownson, Ross		AMC

GDIT Approval:

Name (PRINT): Aaron Chumbris

Signature: 

Date: 12-12-18

Comments:

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

**Peer Review Certification of Non-Participant in
Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
Panel: 19.1 Prevention DI
Meeting: Teleconference**

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/Initials*

GDIT Approval:

Name (PRINT):

Aaron Chumbris

Signature:

AAC

Date:

1-11-19

Comments:

No Additional COIs

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: January 11, 2019

Printed Name: Ross C. Brownson

19.1 PRV DI
January 11, 2019

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

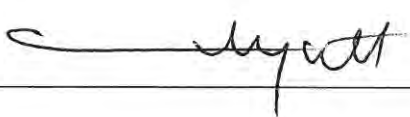
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Nancy Lee Date: Jan. 12, 2019

Printed Name: Nancy Lee

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 1/14/19

Printed Name: Stephen W. Wyatt

**Peer Review Certification of Non-Participant in
Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
Panel: 19.1 Prevention Review Council Programmatic Review Meeting
Meeting: Teleconference Review**

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/Initials*
1/11	PP190029	Savas, Lara	The University of Texas Health Science Center at Houston	Brownson, Ross	Verified telephonically by GDIT	AMC
1/11	PP190029	Savas, Lara	The University of Texas Health Science Center at Houston	Brandt, Heather	Reviewer not present at meeting	AMC
1/11	PP190014	Schmeler, Kathleen	The University of Texas M. D. Anderson Cancer Center	Brownson, Ross	Attendee did not sign out before this application was discussed	AMC
1/11	PP190014	Schmeler, Kathleen	The University of Texas M. D. Anderson Cancer Center	Brandt, Heather	Reviewer not present at meeting	AMC

GDIT Approval:

Name (PRINT):

Aaron Chumbris

Signature:

Aaron Chumbris

Date:

1-11-19

Comments:

PP190014: Meeting attendees did not notice that this CoI was in effect until after application had already been discussed

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

**Peer Review Certification of Non-Participant in
Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
Panel: 19.1 Prevention Review Council Programmatic Review Meeting
Meeting: Teleconference Review**

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/Initials*

GDIT Approval:

Name (PRINT):

Aaron Chumbris

Signature:

AC

Date:

1-11-19

Comments:

No Additional COIs

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: January 11, 2019

Printed Name: Ross C. Brownson

19.1 PRC Programmatic Review
January 11, 2019

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Nancy Lee Date: Jan. 12, 2019

Printed Name: Nancy Lee

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: S. Wyatt Date: 1/14/19

Printed Name: Stephen W. Wyatt

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: RC Brown Date: 12-12-2018

Printed Name: Ross Brownson

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Nancy C Lee Date: 12/12/18

Printed Name: Nancy Lee

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Kevin Thomas Brady Date: 12/12/2018

Printed Name: Kevin Thomas Brady

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Heather M. Brandt Date: 12/12/18

Printed Name: Heather M. Brandt

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

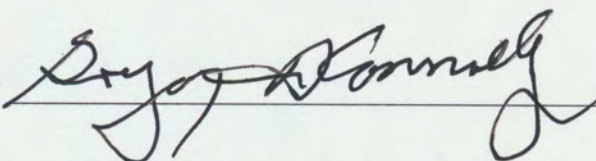
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 12/12/18

Printed Name: FRANK S. BRIGHT

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 12/18/18

Printed Name: GREGORY N. CONNOLLY

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: _____

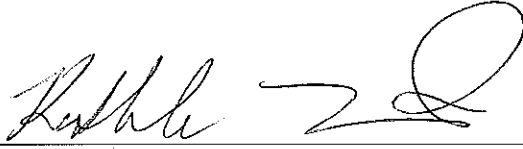
Date: _____

Printed Name: _____

Houise Galaska

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

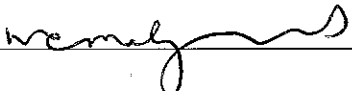
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 12/12/18

Printed Name: Kathleen L. Irwin

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 12/12/18

Printed Name: Martin C. Mahoney MD

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: David C. Momrow Date: 12/12/2018

Printed Name: DAVID C. MOMROW

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Lillian M. Nail Date: 12/12/18

Printed Name: Lillian M. Nail

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

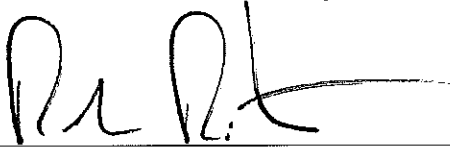
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Charlotte Naschinski Date: 12-12-18

Printed Name: Charlotte Naschinski

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 12/12/18

Printed Name: Robert R. Itta

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

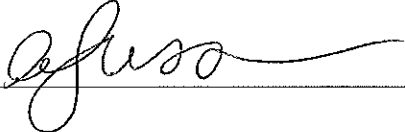
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 12/12/18

Printed Name: Randy Schwartz

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 12.12.18
AMC

Printed Name: ANDREW SUSSMAN

Conflicts of Interest Disclosure
Prevention 19.1 Applications
(Prevention Cycle 19.1 Awards Announced at February 21, 2019, Oversight Committee Meeting)

The table below lists the conflicts of interest (COIs) identified by peer reviewers, Program Integration Committee (PIC) members, and Oversight Committee members on an application-by-application basis. Applications reviewed in Prevention Cycle 19.1 include *Evidence Based Cancer Prevention Services*, *Expansion of Cancer Prevention Services to Rural and Medically Underserved Populations*, and *Tobacco Control and Lung Cancer Screening*. All applications with at least one identified COI are listed below; applications with no COIs are not included. It should be noted that an individual is asked to identify COIs for only those applications that are to be considered by the individual at that particular stage in the review process. For example, Oversight Committee members identify COIs, if any, with only those applications that have been recommended for the grant awards by the PIC. COI information used for this table was collected by General Dynamics Information Technology, CPRIT's third party grant administrator, and by CPRIT.

Application ID	Applicant/PI	Institution	Conflict Noted
Applications considered by the PIC and Oversight Committee			
PP190014	Kathleen Schmeler	The University of Texas M. D. Anderson Cancer Center	H. Brandt; R. Brownson
Applications not considered by the PIC or Oversight Committee			
PP190029	Lara Savas	The University of Texas Health Science Center at Houston	H. Brandt; R. Brownson

Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
Panel: Recruitment FY19 Cycle 4-5
Meeting: Teleconference

This is to certify that I was not present and did not participate in the review of the following applications:

[illegible]

GDIT Approval:

Name (PRINT):

Signature:

Date:

Comments:

No Additional
CONS

Page 1 of 1

Procurement Sensitive Document

Do not copy or circulate without written permission

12/7/2018 3:18:30 PM

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Dr. Richard D. Koludner Date: 12-13-18

Printed Name: 

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

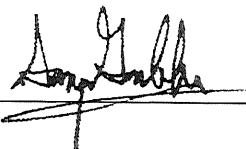
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 12/13/18

Printed Name: Todd Cupp

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 12/13/2018

Printed Name: Sanjiv Gambhir, MD, PhD

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

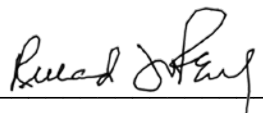
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Peter Jones Date: Dec. 13, 2018

Printed Name: Peter A. Jones

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 12/13/18

Printed Name: Richard J. O'Reilly, MD

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Carol Prives Date: Dec 21, 2018

Printed Name: Carol Prives

**Peer Review Certification of Non-Participant in
Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
Panel: Recruitment FY19 Cycle 6
Meeting: Teleconference**

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/ Initials*

GDIT Approval:

Name (PRINT): Vinicea Carter
 Signature: Vinicea Carter
 Date: 1/17/19

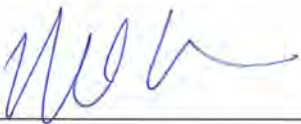
Comments:

No additional COIs

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 1-17-19

Printed Name: Richard D. Kolodner

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

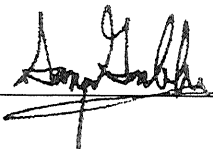
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 1/18/19

Printed Name: Tom CURRAN

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 1/17/19

Printed Name: Sanjiv Gambhir

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 1/17/19

Printed Name: Richard J. O'Reilly, MD

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: Jan 17 2019

Printed Name: Carol Prives

January 17, 2019

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Margaret Tempers Date: 1/17/19

Printed Name: Margaret Tempers

Conflicts of Interest Disclosure
Academic Research Recruitment 19.4-6 Applications
(Academic Research Recruitment Cycle 19.4-6 Awards Announced at February 21, 2019,
Oversight Committee Meeting)

The table below lists the conflicts of interest (COIs) identified by peer reviewers, Program Integration Committee (PIC) members, and Oversight Committee members on an application-by-application basis. Applications reviewed in Academic Research Recruitment Cycle 19.4-6 include *Recruitment of Established Investigators*, *Recruitment of First-Time Tenure-Track Faculty Members*, and *Recruitment of Rising Stars*. All applications with at least one identified COI are listed below; applications with no COIs are not included. It should be noted that an individual is asked to identify COIs for only those applications that are to be considered by the individual at that particular stage in the review process. For example, Oversight Committee members identify COIs, if any, with only those applications that have been recommended for the grant awards by the PIC. COI information used for this table was collected by General Dynamics Information Technology, CPRIT's third party grant administrator, and by CPRIT.

Application ID	Applicant/PI	Institution	Conflict Noted
Applications considered by the PIC and Oversight Committee			
No conflicts reported.			
Applications not considered by the PIC or Oversight Committee			
No conflicts reported.			

**Peer Review Certification of Non-Participant in Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
2019 Cancer Prevention and Research Institute of Texas
Cancer Prevention and Research Institute of Texas Academic Research Program**

Panel: Basic Cancer Research-1

Meeting: Onsite Meeting

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	CSRA Name/Initials*
10/11/18	RP190263	Aguiar, Ricardo	The University of Texas Health Science Center at San Antonio	McMahon, Martin	Confirmed by GDIT Telephonically	VRC
10/19/18	RP190301	Finkelstein, Ilya	The University of Texas at Austin	Manley, James	Confirmed by GDIT Telephonically	VRC
10/19/18	RP190414	McFadden, David	The University of Texas Southwestern Medical Center	McMahon, Martin	Confirmed by GDIT Telephonically	VRC
10/19/18	RP190464	Stone, Everett	The University of Texas at Austin	Prendergast, George	Yn SP/1	VRC

CSRA Approval:

Name (PRINT): Viniceia Carter

Signature: Viniceia Carter

Date: 10/19/18

Comments:

No additional COLs

* A CSRA representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

Peer Review Certification of Non-Participant in Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
2019 Cancer Prevention and Research Institute of Texas
Cancer Prevention and Research Institute of Texas Academic Research Program

Panel: Basic Cancer Research-1

Meeting: Onsite Meeting

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	CSRA Name/Initials*

CSRA Approval:

Name (PRINT): Viniceia Carter

Signature: Viniceia Carter

Date: 10/19/18

Comments:

No additional COIs

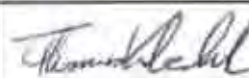
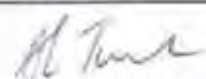
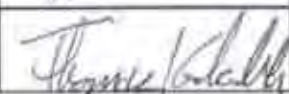
* A CSRA representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

Peer Review Certification of Non-Participant in Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
2019 Cancer Prevention and Research Institute of Texas
Cancer Prevention and Research Institute of Texas Academic Research Program

Panel: Basic Cancer Research-2

Meeting: Onsite Meeting

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/ Initials*
10/23/18	RP190077	Chiang, Cheng-Ming	The University of Texas Southwestern Medical Center	Kodadek, Thomas		Jessica Shelton
10/23/18 ND	RP190087	Tainer, John	The University of Texas M. D. Anderson Cancer Center	Tomkinson, Alan	ND	GS
10/23/18 ND	RP190087	Tainer, John	The University of Texas M. D. Anderson Cancer Center	Chazin, Walter	ND	GS
10/23/18 ND	RP190203	Mazur, Pawel	The University of Texas M. D. Anderson Cancer Center	Bardeesy, Nabeel	ND	GS
10/23/18 ND	RP190332	Millward, Steven	The University of Texas M. D. Anderson Cancer Center	Tomkinson, Alan	ND	GS
10/23/18	RP190421	Goldsmith, Elizabeth	The University of Texas Southwestern Medical Center	Tomkinson, Alan		GS
10/23/18	RP190421	Goldsmith, Elizabeth	The University of Texas Southwestern Medical Center	Kodadek, Thomas		GS

GDIT Approval:

Name (PRINT):

Jessica Shelton

Signature:

Date:

10/23/18

Comments:

no additional cois

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application.

Peer Review Certification of Non-Participant in Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
2019 Cancer Prevention and Research Institute of Texas
Cancer Prevention and Research Institute of Texas Academic Research Program

Panel: Basic Cancer Research-2

Meeting: Onsite Meeting

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/Initials*

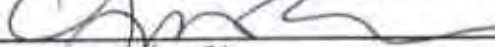
GDIT Approval:

Name (PRINT):

Signature:

Date:

Jessica Shelton



10/23/18

Comments:

no additional
CONS

* A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application.

**Peer Review Certification of Non-Participant in Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
2019 Cancer Prevention and Research Institute of Texas
Cancer Prevention and Research Institute of Texas Academic Research Program**

Panel: Cancer Biology
Meeting: Onsite Meeting

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/ Initials*
10/22/18	RP190078	Krahe, Ralf	The University of Texas M. D. Anderson Cancer Center	Issa, Jean-Pierre	Application Not Discussed	VRC
10/22/18	RP190356	Kim, Jung-whan	The University of Texas at Dallas	Hollingsworth, Michael	Application Not Discussed	VRC
10/22/18	RP190398	Schiff, Rachel	Baylor College of Medicine	Greene, Geoffrey	[Signature]	VRC
10/22/18	RP190398	Schiff, Rachel	Baylor College of Medicine	Tonachel, Anne	[Signature]	VRC
10/22/18	RP190458	Chapkin, Robert	Texas AgriLife Research	Fearon, Eric	[Signature]	VRC

GDIT Approval:

Name (PRINT):

Viniceia Carter

Signature:

Viniceia Carter

Date:

10/22/18

Comments:

No Additional coins

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

Peer Review Certification of Non-Participant in Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
2019 Cancer Prevention and Research Institute of Texas
Cancer Prevention and Research Institute of Texas Academic Research Program

Panel: Cancer Biology

Meeting: Onsite Meeting

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/Initials*

GDIT Approval:

Name (PRINT): Viniceia Carter
 Signature: Viniceia Carter
 Date: 10/22/18

Comments:

No Additional COLs

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

Peer Review Certification of Non-Participant in Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
2019 Cancer Prevention and Research Institute of Texas
Cancer Prevention and Research Institute of Texas Academic Research Program

Panel: Cancer Prevention Research

Meeting: Onsite Meeting

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/ Initials*
10/24/18	RP190039	Patel, Divya	The University of Texas Health Center at Tyler	Brandon, Thomas	ND	gs
10/24/18	RP190044	Robinson, Jason	The University of Texas M. D. Anderson Cancer Center	Schnoll, Robert	WFO	gs
10/24/18	RP190044	Robinson, Jason	The University of Texas M. D. Anderson Cancer Center	Brandon, Thomas	[Signature]	gs
10/24/18	RP190054	Pan, Sheng	The University of Texas Health Science Center at Houston	Li, Christopher	CC	gs
10/24/18	RP190054	Pan, Sheng	The University of Texas Health Science Center at Houston	Petersen, Gloria	[Signature]	gs
10/24/18	RP190054	Pan, Sheng	The University of Texas Health Science Center at Houston	Barlow, William	W Barlow	gs
10/24/18	RP190062	Wang, Wenyi	The University of Texas M. D. Anderson Cancer Center	Mucci, Lorelei	Verified & approved by GDIT	[Signature]

GDIT Approval:

Name (PRINT):

Signature:

Date:

Comments:

no additional
CO's


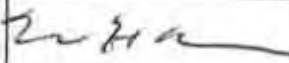

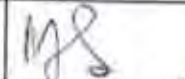

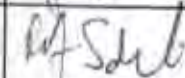

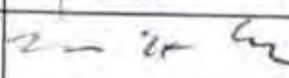



*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

Peer Review Certification of Non-Participant in Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
2019 Cancer Prevention and Research Institute of Texas
Cancer Prevention and Research Institute of Texas Academic Research Program

Panel: Cancer Prevention Research

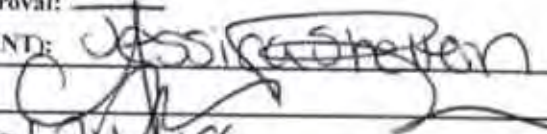
Meeting: Onsite Meeting

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/Initials*
10/24/18	RP190068	Gu, Jian	The University of Texas M. D. Anderson Cancer Center	Haiman, Christopher	ND	
10/24/18	RP190139	Prokhorov, Alexander	The University of Texas M. D. Anderson Cancer Center	Brandon, Thomas		
10/24/18	RP190139	Prokhorov, Alexander	The University of Texas M. D. Anderson Cancer Center	Schnoll, Robert		
10/22/18	RP190210	Volk, Robert	The University of Texas M. D. Anderson Cancer Center	Schnoll, Robert		
10/24/18	RP190210	Volk, Robert	The University of Texas M. D. Anderson Cancer Center	Brandon, Thomas		
10/24/18	RP190232	Hassan, Manal	The University of Texas M. D. Anderson Cancer Center	Haiman, Christopher	ND	
10/24/18	RP190321	Cowell, Lindsay	The University of Texas Southwestern Medical Center	Li, Christopher	ND	

GDIT Approval:

Name (PRINT): Jessica Sherman

Signature: 

Date: 10/24/18

Comments:

no additional
CO's

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

Peer Review Certification of Non-Participant in Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
2019 Cancer Prevention and Research Institute of Texas
Cancer Prevention and Research Institute of Texas Academic Research Program

Panel: Cancer Prevention Research

Meeting: Onsite Meeting

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/ Initials*
10/24/18	RP190321	Cowell, Lindsay	The University of Texas Southwestern Medical Center	Barlow, William	ND	WS
10/24/18	RP190357	Sen, Subrata	The University of Texas M. D. Anderson Cancer Center	Barlow, William	W Barlow	WS
10/24/18	RP190357	Sen, Subrata	The University of Texas M. D. Anderson Cancer Center	Petersen, Gloria	Gloria Petersen	GP
10/24/18	RP190479	Wang, Xuexia	University of North Texas	Kushi, Lawrence	ND	LS

GDIT Approval:

Name (PRINT):

Signature:

Date:

Jessica Grenten
 10/24/18

Comments:

no additional
COI's

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

Peer Review Certification of Non-Participant in Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
2019 Cancer Prevention and Research Institute of Texas
Cancer Prevention and Research Institute of Texas Academic Research Program

Panel: Cancer Prevention Research

Meeting: Onsite Meeting

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/Initials*
10/24/18						

GDIT Approval:

Name (PRINT):

Signature:

Date:

Comments:

Jessica Stetten
 10/24/18

no additional
 COI's

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

**Peer Review Certification of Non-Participant in Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
2019 Cancer Prevention and Research Institute of Texas**

Cancer Prevention and Research Institute of Texas Academic Research Program

Panel: Clinical/Translational Cancer Research

Meeting: Onsite Meeting

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/ Initials*
10/25/18	RP190148	Li, Chun	The University of Texas M. D. Anderson Cancer Center	Engelhard, Victor	ND	CE
10/25/18	RP190166	Keyomarsi, Khandan	The University of Texas M. D. Anderson Cancer Center	Powis, Garth	ND	GS
10/25/18	RP190181	Bertilaccio, Maria Teresa	The University of Texas M. D. Anderson Cancer Center	Powis, Garth	ND	GS
10/25/18	RP190219	Liang, Han	The University of Texas M. D. Anderson Cancer Center	Dubinett, Steven	ND	CE
10/25/18	RP190222	Kopetz, Scott	The University of Texas M. D. Anderson Cancer Center	Powis, Garth	ND	GS
10/25/18	RP190253	Korkut, Anil	The University of Texas M. D. Anderson Cancer Center	Powis, Garth	ND	GS
10/25/18	RP190326	Nurieva, Roza	The University of Texas M. D. Anderson Cancer Center	Dubinett, Steven	ND	CE

GDIT Approval:

Name (PRINT):

Signature:

Date:

Comments:

no additional
COI's

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application.

Peer Review Certification of Non-Participant in Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
2019 Cancer Prevention and Research Institute of Texas
Cancer Prevention and Research Institute of Texas Academic Research Program

Panel: Clinical/Translational Cancer Research

Meeting: Onsite Meeting

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/Initials*
10/25/18	RP190326	Nurieva, Roza	The University of Texas M. D. Anderson Cancer Center	Engelhard, Victor	V. Engelhard	CJS
10/25/18	RP190341	Kwong, Lawrence	The University of Texas M. D. Anderson Cancer Center	Engelhard, Victor	ND	CJS
10/25/18	RP190371	Reynolds, Charles	Texas Tech University Health Sciences Center	Kast, W. Martin	ND	CJS

GDIT Approval:

Name (PRINT):

Signature:

Date:

Comments:

no additional
COI's

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application.

Peer Review Certification of Non-Participant in Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
2019 Cancer Prevention and Research Institute of Texas
Cancer Prevention and Research Institute of Texas Academic Research Program
Panel: Clinical/Translational Cancer Research
Meeting: Onsite Meeting

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/Initials*
10/25/18						

GDIT Approval:

Name (PRINT):

Signature:

Date:

Jessie Sherton
[Signature]
 10/25/18

Comments:

no additional
COI's

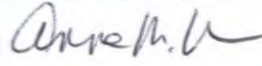
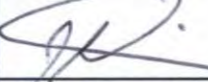
* A GDIT representative will add their name and initials in the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application.

**Peer Review Certification of Non-Participant in Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
2019 Cancer Prevention and Research Institute of Texas
Cancer Prevention and Research Institute of Texas Academic Research Program**

Panel: Imaging Technology and Informatics

Meeting: Onsite Meeting

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/Initials*
10/18/18	RP190019	Sevick, Eva	The University of Texas Health Science Center at Houston	Wu, Anna		√RC
10/18/18	RP190058	Fetzer, David	The University of Texas Southwestern Medical Center	Zinn, Kurt	Application not discussed	√RC
10/18/18	RP190076	Hoyt, Kenneth	The University of Texas at Dallas	Basilion, James	Application not discussed	√RC
10/18/18	RP190076	Hoyt, Kenneth	The University of Texas at Dallas	Zinn, Kurt	Application not discussed	√RC
10/18/18	RP190164	Sorace, Anna	The University of Texas at Austin	Zinn, Kurt	Application not discussed	√RC
10/18/18	RP190211	Pagel, Mark	The University of Texas M. D. Anderson Cancer Center	Basilion, James		√RC
10/18/18	RP190244	Lin, Lilie	The University of Texas M. D. Anderson Cancer Center	Mankoff, David	Application not discussed	√RC

GDIT Approval:

Name (PRINT):

Signature:

Date:

Viniceia Carter
Viniceia Carter
10/18/2018

Comments:

No additional COIs

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application


**Peer Review Certification of Non-Participant in Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
2019 Cancer Prevention and Research Institute of Texas**

Cancer Prevention and Research Institute of Texas Academic Research Program

Panel: Imaging Technology and Informatics

Meeting: Onsite Meeting

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/ Initials*
10/18/18	RP190304	Fei, Baowei	The University of Texas at Dallas	Basilion, James		VRC

GDIT Approval:

Name (PRINT):

Signature:

Date:

Viniceia Carter
Viniceia Carter
10/18/18

Comments:

No additional COLs

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

Peer Review Certification of Non-Participant in Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
2019 Cancer Prevention and Research Institute of Texas
Cancer Prevention and Research Institute of Texas Academic Research Program

Panel: Imaging Technology and Informatics

Meeting: Onsite Meeting

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/Initials*

GDIT Approval:

Name (PRINT): Viniceia Carter (VINICEIA Carter)

Signature: Viniceia Carter

Date: 10/18/18

Comments:

No additional COIs

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: Oct 19, 2018

Printed Name: Tom Corrigan

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/19/18

Printed Name: ALEXANDER ANDERSON

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

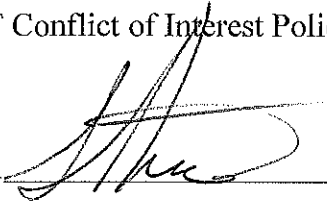
Signature:  Date: 10/19/2018

Printed Name: ALLAN BALMAN

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: _____



Date: _____

10-19-18

Printed Name: _____

Steve Fiering

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

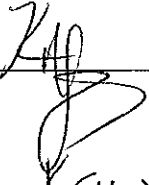
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/19/2018

Printed Name: David Gils

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/12/18

Printed Name: KEVIN HIGGS

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10-19-18

Printed Name: Phil Hinds

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

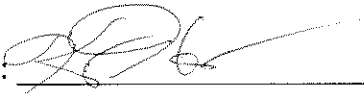
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: David P. Houchens Date: 10/19/18

Printed Name: David P. Houchens

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/19/18

Printed Name: Kent Hunter

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: James L Manley Date: 10/22/2018

Printed Name: James L. Manley

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Martin McMahon Date: 10/19/2018

Printed Name: MARTIN McMAHON

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

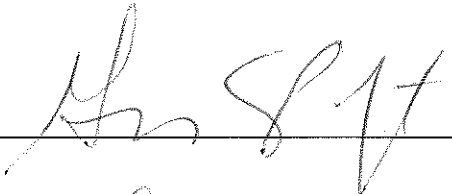
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/19/18

Printed Name: Laura D. Forker

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/19/18

Printed Name: George C. Pendery as +

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Heide Schatten Date: Oct 19 - 2018

Printed Name: HEIDE SCHATTEN

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

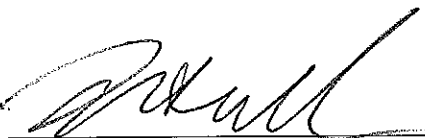
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/19/18

Printed Name: Kristin R Swanson

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

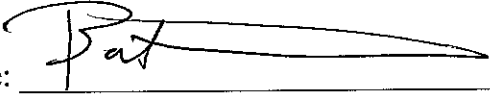
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/19/18

Printed Name: Robert Wechsler-Reyer

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/18/18

Printed Name: BART WILLIAMS

October 23, 2018

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: Oct 23, 2018

Printed Name: CAROL PRIVES

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Nabeel Bardeesy Date: Oct 25/2018

Digitally signed by Nabeel Bardeesy
DN: cn=Nabeel Bardeesy, o=Massachusetts
General Hospital, ou=Cancer Center,
email=Bardeesy.Nabeel@mgsl.harvard.edu,
c=US
Date: 2018.10.25 18:25:09 -0400

Printed Name: Nabeel Bardeesy

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Shelley Berger Date: Oct 23 2018

Printed Name: Shelley Berger

October 23, 2018

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Walter J. Chazin Date: 10/23/2018

Printed Name: Walter J. Chazin

October 23, 2018

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/23/2018

Printed Name: Xinbin chen

October 23, 2018

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

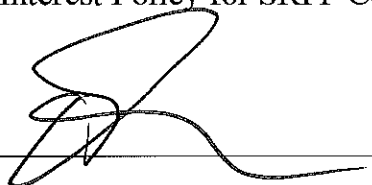
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: W. Edelmann Date: 10/23/18

Printed Name: W. Edelmann

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 23 Oct. 2018

Printed Name: David Feldser

October 23, 2018

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Thomas Kodadek Date: 10/23/18

Printed Name: THOMAS KODADEK

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

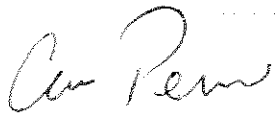
Signature: James J. Manfredi Date: 10/23/18

Printed Name: James J. Manfredi

October 23, 2018

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

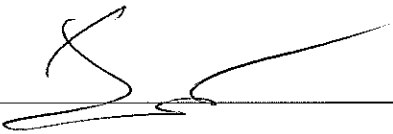
Signature:  Date: 10-23-18

Printed Name: CURTIS PESMEN

October 23, 2018

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/23/18

Printed Name: SOHAN PETRINI

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

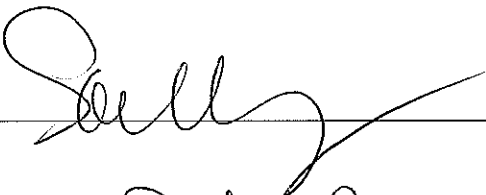
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Ellen Pure Date: 10/23/18

Printed Name: Ellen Pure

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

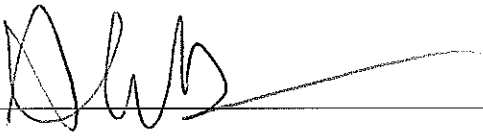
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: October 23, 2018

Printed Name: Sandra Ryceom

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: Oct 23 2018

Printed Name: Al-Sherman

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: _____

Date: _____

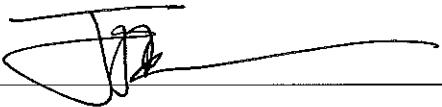
Printed Name: _____

NAHUM SONENBERG

October 23, 2018

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 23 Oct 2018

Printed Name: JAMES TAYLOR

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: AL Tomlinson Date: Oct 23, 2018

Printed Name: ALAN TOMKINSON

October 23, 2018

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Matthew Watzman Date: 10/23/18

Printed Name: MATTHEW WATZMAN

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.


Signature: Jeff Wrana Date: Oct. 23, 2018

Printed Name: JEFF WRANA

e

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/22/18

Printed Name: PETER JONES

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

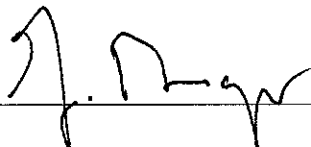
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Steven Belinsky Date: 10/22/18

Printed Name: Steven Belinsky

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/22/2018

Printed Name: GABRIELE BERGER

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

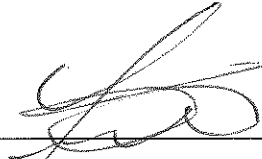
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: OCT 22, 2018

Printed Name: DANIEL D. DE CARVALHO

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/22/18

Printed Name: Y. DECKER

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

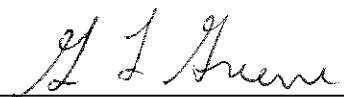
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10-22-18

Printed Name: Eric R. Fearon

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/22/18

Printed Name: Geoffrey L. Greene

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/22/18

Printed Name: Patrick J. Groher

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

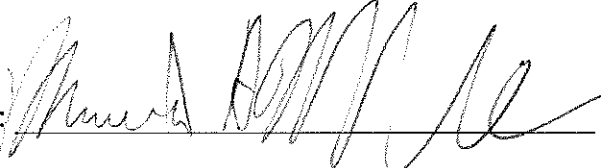
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/22/18

Printed Name: WILLIAM C. HAHN

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

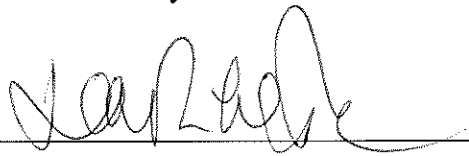
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/22/2018

Printed Name: Michael A. Hollingsworth

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: Oct 22, 2018

Printed Name: JEAN-PIERRE ISSA

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

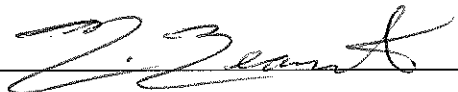
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/22/18

Printed Name: MEISSNER

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

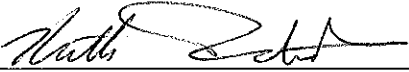
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/22/2018

Printed Name: Nouri N. Alami

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/22/18

Printed Name: Keith Robertson

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Anne R Tonachel Date: October 22, 2018

Printed Name: Anne R Tonachel

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Carol Vallott Date: 10-22-18

Printed Name: CAROL VALLOTT

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10-22-18

Printed Name: Ting Wang

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Zena Werb Date: 10/22/18

Printed Name: Zena Werb

October 24, 2018

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Thomas A. Sellers Date: 10/24/18

Printed Name: Thomas A. Sellers

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: William Barlow Date: 10/24/18

Printed Name: William Barlow

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Brian Booker Date: 10/24/2018

Printed Name: Brian Booker

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

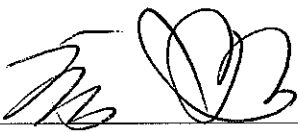
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10-24-18

Printed Name: Thomas Brandon

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/24/18

Printed Name: Zigang Dong

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Brooke Fridley Date: 10/24/2018

Printed Name: BROOKE FRIDLEY

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.


Signature: Michael Judith Gillman Date: 10/24/2018

Printed Name: Michael Judith Gillman

October 24, 2018

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

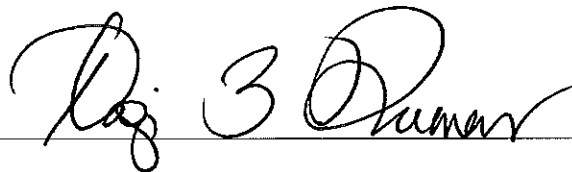
Signature:  Date: 10-24-18

Printed Name: Chris Harman

October 24, 2018

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/24/2018

Printed Name: NAGI B. KUMAR

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.


Signature: Lawrence H. Kushi Date: 10/24/2018

Printed Name: Lawrence H. Kushi

October 24, 2018

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/24/18

Printed Name: Christopher Li

October 24, 2018

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Maria E. Martinez Date: 10/24/18

Printed Name: Maria Elena Martinez

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

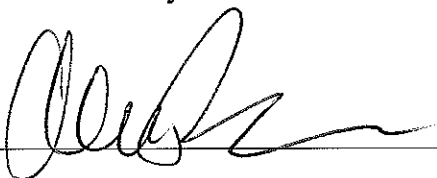
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/31/18

Printed Name: Lorelei Mucci

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/24/18

Printed Name: Alex Parker

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Gloria Petersen Date: 10/24/18

Printed Name: Gloria Petersen

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

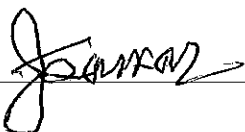
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/24/2018

Printed Name: Chinthalapally V. Rao.

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

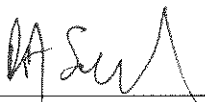
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/23/18 ^{24/18}

Printed Name: FAZLUL H. SARKAR

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10-24-18

Printed Name: Robert Schnoff

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/25/18

Printed Name: Richard J. O'Reilly

October 25, 2018

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Margaret Tempero Date: 10/25/18

Printed Name: Margaret Tempero

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 11/12/18

Printed Name: ALEX A. ADJEI

October 25, 2018

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/25/18

Printed Name: STEPHEN BALK

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Paul A. Bunn Date: 10/25/18

Printed Name: PAUL A. BUNN

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.


Signature:  Date: 10/25/18

Printed Name: Arthur Curran

October 25, 2018

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/25/18

Printed Name: STEVEN DUBINETT

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/25/18

Printed Name: Victor H. Engelhardt

October 25, 2018

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: _____



Date: _____

10/25/2018


Printed Name: _____

OLIVERA FINA

October 25, 2018

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

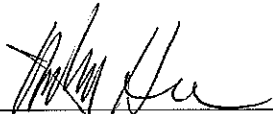
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/25/18

Printed Name: Samantha R Guild

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/25/2018

Printed Name: MICKEY HU

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10-25-18

Printed Name: W. MARTIN KAST

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: Oct. 25, 2018

Printed Name: YING LU

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

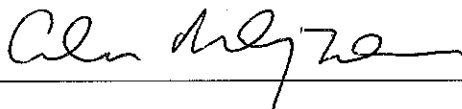
Signature: Robert Mesloh Date: 10-25-18

Printed Name: ROBERT MESLOH

October 25, 2018

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 25 OCT 18

Printed Name: CHARLES MULLIGAN

October 25, 2018

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Donna Niedzwiecki Date: Oct. 25, 2018

Printed Name: Donna Niedzwiecki

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

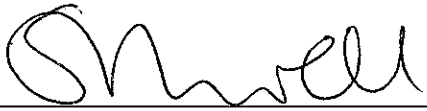
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Mh Date: 10/25/18

Printed Name: PARKMAN

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

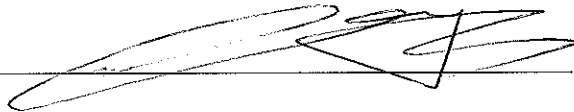
Signature:  Date: 10/25/18

Printed Name: S.N. POWELL

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: _____



Date: _____

10/25/18

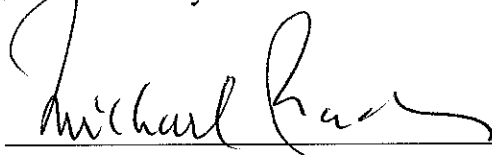
Printed Name: _____

Garth Powis

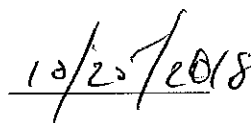
**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

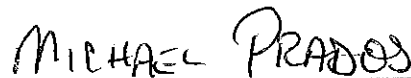
Signature: _____



Date: _____



Printed Name: _____



October 25, 2018

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: _____



Date: _____

10-26-18

Printed Name: _____

J. Ritz

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Alessandro Sette Date: Oct 25th, 2018

Printed Name: ALESSANDRO SETTE

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Neil P. Shah Date: 10/25/18

Printed Name: Neil P. Shah

October 25, 2018

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

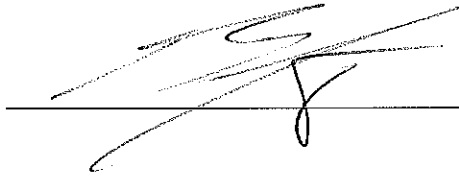
Signature:  Date: 10/25/18

Printed Name: W. P. L. S. R. N.

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: _____



Date: _____

10/25/18

Printed Name: _____

Barry Taylor

October 25, 2018

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Donna Nichols Threlkeld Date: 10/25/18

Printed Name: Donna Nichols Threlkeld

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

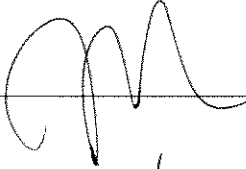
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: David Uehling Date: 10/25/18

Printed Name: David Uehling

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

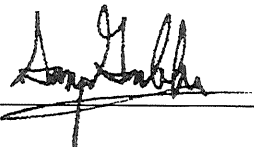
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/25/18

Printed Name: Jen Sen Yeh

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

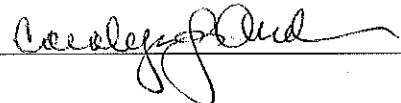
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 11/2/2018

Printed Name: Sanjiv Gambhir

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10-18-18

Printed Name: Carolyn Anderson

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/18/18

Printed Name: James P. Basilion

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/18/18

Printed Name: Ross Berbeco

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

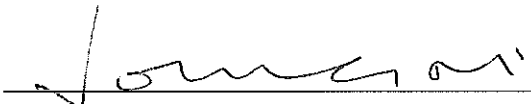
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/18/18

Printed Name: Weibo Cai

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10.18.18

Printed Name: J. GORE

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

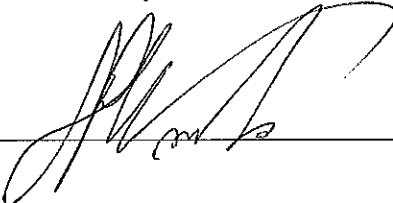
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: D. Haas-Kogan Date: 10-18-18

Printed Name: Daphne Haas-Kogan

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

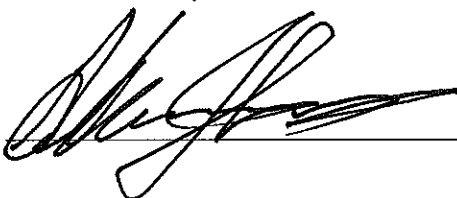
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/18/18

Printed Name: Hossein Jadvar

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10-18-2018

Printed Name George Allan Johnson

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

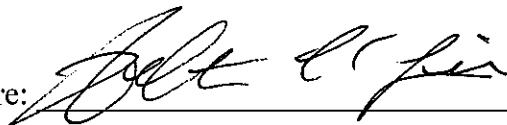
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/18/18

Printed Name: JASON LEWIS

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

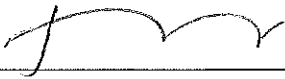
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/18/18

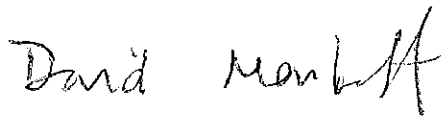
Printed Name: Jonathan T.C. Liu

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

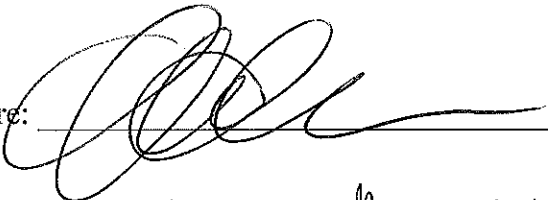
Signature:  Date: 10/18/18

Printed Name: 



**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

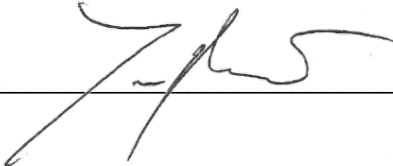
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/18/18

Printed Name: Margerie McNeill Manning

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

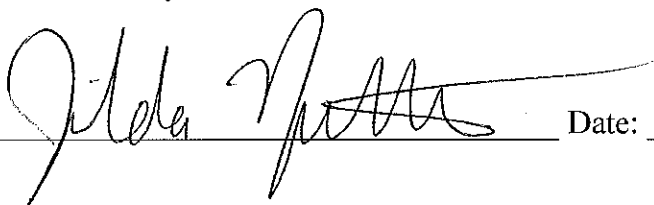
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  _____ Date: 10/19/2018

Printed Name: Duane Mitchell

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/18/18

Printed Name: Silda Nettleton

October 18, 2018

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: _____

Date: _____

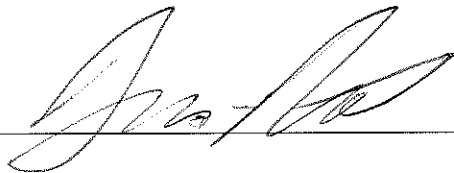
Printed Name: _____

Martin Pouper

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: _____



Date: _____

10/18/2018

Printed Name: _____

BRIAN RUTT

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Mark L. Stolz Date: 10/18/18

Printed Name: MARK L. STOLWITZ

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/18/18

Printed Name: JULIE SUTCLIFFE

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

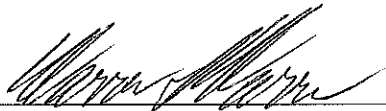
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/18/18

Printed Name: HENRY F. VAN BROCKLIN

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 10/18/18

Printed Name: Warren S. Warren

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Anna M. Wu Date: 10/18/18

Printed Name: Anna M Wu

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: K. R. Zimm Date: 10-18-18

Printed Name: Kurt R. Zimm

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 12-6-18

Printed Name: Richard Kolodner

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: Dec 6, 2018

Printed Name: Tom Curran

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: Dec. 6, 2018

Printed Name: Peter A. Jones

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 12/6/18

Printed Name: Richard J. O'Reilly, MD

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Carol Prives Date: Dec 6, 2018

Printed Name: Carol Prives

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Thomas A. Sellers Date: 12/6/18

Printed Name: Thomas A. Sellers

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Margaret Tempero Date: 12/6/18

Printed Name: Margaret Tempero

Peer Review Certification of Non-Participant in Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
2018 Cancer Prevention and Research Institute of Texas Academic Research Program
19.1 Scientific Review Council Meeting
Meeting Type: Teleconference Review

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/Initials*

GDIT Approval:

Name (PRINT):	ViNiceia Carter
Signature:	<i>ViNiceia Carter</i>
Date:	12/5/2018

Comments:

No Additional COIs

* A GDIT Representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application.

Procurement Sensitive Document

Do not copy or circulate without written permission.

Conflicts of Interest Disclosure
Academic Research 19.1 Applications
(Academic Research Cycle 19.1 Awards Announced at February 21, 2019, Oversight Committee Meeting)

The table below lists the conflicts of interest (COIs) identified by peer reviewers, Program Integration Committee (PIC) members, and Oversight Committee members on an application-by-application basis. Applications reviewed in Academic Research Cycle 19.1 include *Individual Investigator Research Awards*, *Individual Investigator Research Awards for Cancer in Children and Adolescents*, *Individual Investigator Research Awards for Clinical Translation*, *Individual Investigator Research Awards for Computational Biology*, and *Individual Investigator Research Awards for Prevention and Early Detection*. All applications with at least one identified COI are listed below; applications with no COIs are not included. It should be noted that an individual is asked to identify COIs for only those applications that are to be considered by the individual at that particular stage in the review process. For example, Oversight Committee members identify COIs, if any, with only those applications that have been recommended for the grant awards by the PIC. COI information used for this table was collected by General Dynamics Information Technology, CPRIT's third party grant administrator, and by CPRIT.

Application ID	Applicant/PI	Institution	Conflict Noted
Applications considered by the PIC and Oversight Committee			
RP190414pe/ RP190414	David McFadden	The University of Texas Southwestern Medical Center	M. McMahon
RP190077pe/ RP190077	Cheng-Ming Chiang	The University of Texas Southwestern Medical Center	T. Kodadek
RP190301pe	Ilya Finkelstein	The University of Texas at Austin	A. Tomkinson;C. Prives;W. Chazin
RP190301	Ilya Finkelstein	The University of Texas at Austin	J. Manley
RP190421pe/ RP190421	Elizabeth Goldsmith	The University of Texas Southwestern Medical Center	A. Tomkinson;T. Kodadek
RP190398pe	Rachel Schiff	Baylor College of Medicine	G. Greene
RP190398	Rachel Schiff	Baylor College of Medicine	A. Tonachel;G. Greene
RP190210pe/ RP190210	Robert Volk	The University of Texas M. D. Anderson Cancer Center	R. Schnoll;T. Brandon

Application ID	Applicant/PI	Institution	Conflict Noted
RP190326pe/ RP190326	Roza Nurieva	The University of Texas M. D. Anderson Cancer Center	S. Dubinett;V. Engelhard
RP190019pe/ RP190019	Eva Seveck	The University of Texas Health Science Center at Houston	A. Wu
RP190211pe/ RP190211	Mark Pagel	The University of Texas M. D. Anderson Cancer Center	J. Basilion
Applications not considered by the PIC or Oversight Committee			
RP190464pe/ RP190464	Everett Stone	The University of Texas at Austin	G. Prendergast
RP190087pe/ RP190087*	John Tainer	The University of Texas M. D. Anderson Cancer Center	A. Tomkinson;W. Chazin
RP190203pe/ RP190203*	Pawel Mazur	The University of Texas M. D. Anderson Cancer Center	N. Bardeesy
RP190314pe	Jason Huse	The University of Texas M. D. Anderson Cancer Center	J. Petrini
RP190332pe/ RP190332*	Steven Millward	The University of Texas M. D. Anderson Cancer Center	A. Tomkinson
RP190078pe/ RP190078*	Ralf Krahe	The University of Texas M. D. Anderson Cancer Center	J. Issa
RP190245pe	Yunfei Wen	The University of Texas M. D. Anderson Cancer Center	M. Hollingsworth
RP190356pe/ RP190356*	Jung-whan Kim	The University of Texas at Dallas	M. Hollingsworth
RP190458pe/ RP190458	Robert Chapkin	Texas AgriLife Research	E. Fearon
RP190039pe/ RP190039*	Divya Patel	The University of Texas Health Center at Tyler	T. Brandon
RP190044pe/ RP190044	Jason Robinson	The University of Texas M. D. Anderson Cancer Center	R. Schnoll;T. Brandon
RP190054pe/ RP190054	Sheng Pan	The University of Texas Health Science Center at Houston	C. Li;G. Petersen;W. Barlow

* = Not discussed

Application ID	Applicant/PI	Institution	Conflict Noted
RP190062pe/ RP190062	Wenyi Wang	The University of Texas M. D. Anderson Cancer Center	L. Mucci
RP190068pe/ RP190068*	Jian Gu	The University of Texas M. D. Anderson Cancer Center	C. Haiman
RP190139pe/ RP190139	Alexander Prokhorov	The University of Texas M. D. Anderson Cancer Center	R. Schnoll;T. Brandon
RP190232pe/ RP190232*	Manal Hassan	The University of Texas M. D. Anderson Cancer Center	C. Haiman
RP190281pe	Olena Weaver	The University of Texas M. D. Anderson Cancer Center	C. Li
RP190321pe/ RP190321*	Lindsay Cowell	The University of Texas Southwestern Medical Center	C. Li;W. Barlow
RP190357pe/ RP190357	Subrata Sen	The University of Texas M. D. Anderson Cancer Center	G. Petersen;W. Barlow
RP190479pe/ RP190479*	Xuexia Wang	University of North Texas	L. Kushi
RP190016pe	Damith Udugamasooriya	University of Houston	S. Dubinett
RP190148pe/ RP190148*	Chun Li	The University of Texas M. D. Anderson Cancer Center	V. Engelhard
RP190166pe/ RP190166*	Khandan Keyomarsi	The University of Texas M. D. Anderson Cancer Center	G. Powis
RP190181pe/ RP190181*	Maria Teresa Bertilaccio	The University of Texas M. D. Anderson Cancer Center	G. Powis
RP190219pe/ RP190219*	Han Liang	The University of Texas M. D. Anderson Cancer Center	S. Dubinett
RP190222pe/ RP190222	Scott Kopetz	The University of Texas M. D. Anderson Cancer Center	G. Powis
RP190253pe/ RP190253*	Anil Korkut	The University of Texas M. D. Anderson Cancer Center	G. Powis

* = Not discussed

Application ID	Applicant/PI	Institution	Conflict Noted
RP190341pe/ RP190341*	Lawrence Kwong	The University of Texas M. D. Anderson Cancer Center	V. Engelhard
RP190352pe	Y. Alan Wang	The University of Texas M. D. Anderson Cancer Center	G. Powis
RP190371pe/ RP190371*	Charles Reynolds	Texas Tech University Health Sciences Center	W. Kast
RP190481pe	Justyn Jaworski	The University of Texas at Arlington	S. Dubinett
RP190058pe/ RP190058*	David Fetzner	The University of Texas Southwestern Medical Center	K. Zinn
RP190076pe/ RP190076*	Kenneth Hoyt	The University of Texas at Dallas	J. Basilion;K. Zinn
RP190119pe	Rahul Sheth	The University of Texas M. D. Anderson Cancer Center	W. Cai
RP190164pe/ RP190164*	Anna Sorace	The University of Texas at Austin	K. Zinn
RP190244pe/ RP190244*	Lilie Lin	The University of Texas M. D. Anderson Cancer Center	D. Mankoff
RP190277pe	Kevin Burgess	Texas A&M University	W. Cai
RP190304pe/ RP190304	Baowei Fei	The University of Texas at Dallas	J. Basilion
RP190438pe	Mihaela Stefan	The University of Texas at Dallas	K. Zinn
RP190263	Ricardo Aguiar	The University of Texas Health Science Center at San Antonio	M. McMahon

**Peer Review Certification of Non-Participant in
Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
Panel: Recruitment FY19 Cycle 7
Meeting: Teleconference**

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/ Initials*

GDIT Approval:

Name (PRINT): V. Niceia Carter
Signature: V. Niceia Carter
Date: 2/14/19

Comments:

No additional COIs

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

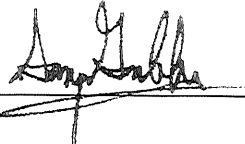
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 2-15-2019

Printed Name: Richard Kolodner

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 2/19/2019

Printed Name: Sanjiv Gambhir

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Peter Jones Date: 2/15/19

Printed Name: Peter A Jones

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 2/18/19

Printed Name: Richard J. O'Reilly, MD

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: _____ *Carol Prives* _____ Date: _____ Feb 15, 2019

Printed Name: _____ Carol Prives _____

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Margaret Tempers Date: 2/15/19

Printed Name: MARGARET Tempers

**Peer Review Certification of Non-Participant in
Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
Panel: Recruitment FY19 Cycle 8
Meeting: Teleconference**

This is to certify that I was not present and did not participate in the review of the following applications:

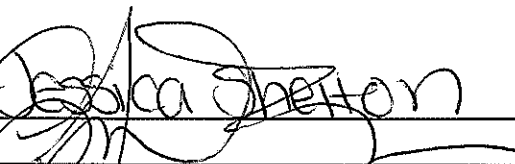
Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/Initials*
3/14/19	RR190050	Draetta, Gulio	The University of Texas M. D. Anderson Cancer Center	Jones, Peter	Verified telephonically by GDIT	

GDIT Approval:

Name (PRINT):

Signature:

Date:


3/14/19

Comments:

no additional
COI's

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

**Peer Review Certification of Non-Participant in
Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
Panel: Recruitment FY19 Cycle 8
Meeting: Teleconference**

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/Initials*
3/14/19						

GDIT Approval:

Name (PRINT):

Signature:

Date:

Comments:

no additional
COIS

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 3-14-2019

Printed Name: Richard Kolodner

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

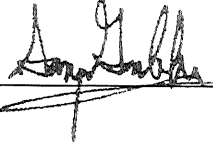
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 03/14/2019

Printed Name: Tom Curran

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 3/14/2019

Printed Name: Sanjiv Gambhir

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: March 15, 2019

Printed Name: Peter A. Jones

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 3/14/19

Printed Name: Richard J. O'Reilly, MD

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: TL A Sellers Date: 3/15/19

Printed Name: Thomas A. Sellers

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Margaret Tempero Date: 3/14/19

Printed Name: Margaret Tempero

**Peer Review Certification of Non-Participant in
Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
Panel: Recruitment FY19 Cycle 9
Meeting: Teleconference**

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/Initials*

GDIT Approval:

Name (PRINT): Viniceia Carter
 Signature: Viniceia Carter
 Date: 4/11/2019

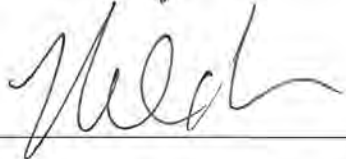
Comments:

No additional COIs

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

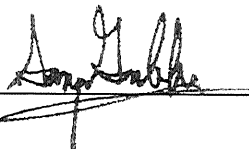
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 4/11/2019

Printed Name: Richard Kolodner

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 4/11/2019

Printed Name: Sanjiv Gambhir

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 4/11/19

Printed Name: Richard J. O'Reilly, MD

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Carol Prives Date: April 11, 2019

Carol Prives

Printed Name: _____

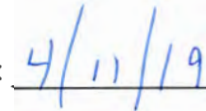
**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: _____



Date: _____



Printed Name: _____



**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Margaret Tempers Date: 4/11/19

Printed Name: Margaret Tempers

Conflicts of Interest Disclosure
Academic Research Recruitment 19.7-9 Applications
(Academic Research Recruitment Cycle 19.7-9 Awards Announced at May 15, 2019,
Oversight Committee Meeting)

The table below lists the conflicts of interest (COIs) identified by peer reviewers, Program Integration Committee (PIC) members, and Oversight Committee members on an application-by-application basis. Applications reviewed in Academic Research Recruitment Cycle 19.7-9 include *Recruitment of Established Investigators*, *Recruitment of First-Time Tenure-Track Faculty Members*, and *Recruitment of Rising Stars*. All applications with at least one identified COI are listed below; applications with no COIs are not included. It should be noted that an individual is asked to identify COIs for only those applications that are to be considered by the individual at that particular stage in the review process. For example, Oversight Committee members identify COIs, if any, with only those applications that have been recommended for the grant awards by the PIC. COI information used for this table was collected by General Dynamics Information Technology, CPRIT's third party grant administrator, and by CPRIT.

Application ID	Applicant/PI	Institution	Conflict Noted
Applications considered by the PIC and Oversight Committee			
RR190050	Draetta, Gulio	The University of Texas M. D. Anderson Cancer Center	Jones, Peter; Montgomery, Will
RR190034	Thiele, Dwain	The University of Texas Southwestern Medical Center	Montgomery, Will
RR190037	Thiele, Dwain	The University of Texas Southwestern Medical Center	Montgomery, Will
RR190043	Kuspa, Adam	Baylor College of Medicine	Montgomery, Will
RR190046	Rossky, Peter J	Rice University	Montgomery, Will
RR190052	DesRoches, Reginald	Rice University	Montgomery, Will
RR190054	Kuspa, Adam	Baylor College of Medicine	Montgomery, Will
RR190056	DesRoches, Reginald	Rice University	Montgomery, Will
RR190058	Lee, W. P. Andrew	The University of Texas Southwestern Medical Center	Montgomery, Will

Application ID	Applicant/PI	Institution	Conflict Noted
RR190059	Lee, W. P. Andrew	The University of Texas Southwestern Medical Center	Montgomery, Will
Applications not considered by the PIC or Oversight Committee			
No conflicts reported.			

**Peer Review Certification of Non-Participant in
Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
Panel: 19.2 Product Development Panel-1
Meeting: Teleconference Meeting**

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	CSRA Name/Initials*
3-18-19	DP190067	Digonis, Labros	Insybio Inc.	McKew, John	Not discussed	KW

CSRA Approval:

Name (PRINT): Katherine Weilmister

Signature: 

Date: 3-18-19

Comments:

No additional COI's

* A CSRA representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

**Peer Review Certification of Non-Participant in
Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
Panel: 19.2 Product Development Panel-1
Meeting: Teleconference Meeting**

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	CSRA Name/Initials*

CSRA Approval:

Name (PRINT): Katherine Weilmaster

Signature: 

Date: 3-18-19

Comments:

No additional COI's

* A CSRA representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

**Peer Review Certification of Non-Participant in
Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
Panel: 19.2 Product Development Panel-2
Meeting: Teleconference Meeting**

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	CSRA Name/Initials*
3/19/19	DP190073	Alibhai, Imran	Tvardi Therapeutics, Inc	Silberman, Sandra	Verified telephonically by GDIT	
3/19/19	DP190093	Raj, Ganesh	EtiraRx, LLC	Silberman, Sandra	Verified telephonically by GDIT	
3/19/19	DP190093	Raj, Ganesh	EtiraRx, LLC	Rudoltz, Marc	Was not present for teleconference	
3/19/19	DP190099	Indolfi, Laura	PanTher Therapeutics, Inc	Rudoltz, Marc	Was not present for teleconference	

CSRA Approval:

Name (PRINT):

Katherine Weilminster

Signature:

3-19-19

Date:

Comments:

No Additional COI'S

* A CSRA representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

**Peer Review Certification of Non-Participant in
Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
Panel: 19.2 Product Development Panel-2
Meeting: Teleconference Meeting**

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	CSRA Name/Initials*

CSRA Approval:

Name (PRINT):

Katherine Wolminster

Signature:

[Handwritten Signature]

Date:

3-19-19


Comments:

No Additional COI's

* A CSRA representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

**Peer Review Certification of Non-Participant in
Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
Panel: 19.2 Product Development Panel-1
Meeting: Onsite Meeting**

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/ Initials*
4/16	DP190067	Digonis, Labros	Insybio Inc.	McKew, John	Not discussed	

GDIT(PRINT):

Signature:

Date:

Comments:

No additional COIs

* A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

**Peer Review Certification of Non-Participant in
Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
Panel: 19.2 Product Development Panel-1
Meeting: Onsite Meeting**

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/Initials*

GDIT Approval:

Name (PRINT)

Signature:

Date:

Comments:

No additional COIs

* A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

**Peer Review Certification of Non-Participant in
Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
Panel: 19.2 Product Development Panel-2
Meeting: Onsite Meeting**

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/Initials*
4/17	DP190073	Alibhai, Imran	Tvardi Therapeutics, Inc	Silberman, Sandra	<i>Sandra Silberman</i>	<i>KS</i>
4/17	DP190093	Raj, Ganesh	EtiraRx, LLC	Silberman, Sandra	<i>Sandra Silberman</i>	<i>KS</i>
4/17	DP190093	Raj, Ganesh	EtiraRx, LLC	Rudoltz, Marc	Did not attend	<i>KS</i>
4/17	DP190099	Indolfi, Laura	PanTher Therapeutics, Inc	Rudoltz, Marc	Did not attend	<i>KS</i>

GDIT Approval:

Name (PRINT):

Katherine Weinstater

Signature:

Date:

4-18-19

Comments:

No additional COIs

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

**Peer Review Certification of Non-Participant in
Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
Panel: 19.2 Product Development Panel-2
Meeting: Onsite Meeting**

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/Initials*

GDIT Approval:

Name (PRINT): Katherine Weilminster

Signature: 

Date: 4/18/19

Comments:

No Additional COIs

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

**Peer Review Certification of Non-Participant in
Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
Panel: 19.2 Due Diligence
Meeting: Teleconference**

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/Initials*

GDIT Approval:

Name (PRINT):

Signature:

Date:

Kat Weilmaster

[Signature]

7/8/19

Comments:

No additional COI's

* A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  MD PhD Date: 7/23/2019

Printed Name: Dr. Kelly Bolton

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 7/9/19

Printed Name: Neil J Cleander MD

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 7-10/19

Printed Name: Roy Cosan

July 8, 2019

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: July 8, 2019

Printed Name: Phyllis Gardner

19.2 Due Diligence Panel (DDP)
July 8, 2019

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: *J. Meltsky* Date: *7/8/19*

Printed Name: *Grctosy*

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 8th July 2019.

Printed Name: Anant Madabhushi

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

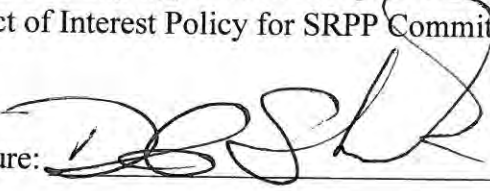
Signature: Helen Maslocka Date: 7/11/19

Printed Name: Helen MASLOCKA

July 8, 2019


**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Date: 9 Jul '19Printed Name: David G. Shoemaker

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 7/10/2019

Printed Name: NEIL SPECTOR

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

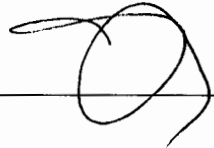
Signature:  Date: 7/10/19

Printed Name: GEORGE TRAINOR

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: _____



Date: _____

7.12.19

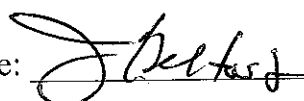
Printed Name: _____

COLIN TURNBULL

April 16, 2019

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 4/16/19

Printed Name: Ector

April 16, 2019

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Leila Alland Date: 18 Apr 2019

Printed Name: Leila Alland

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Chitra Edwin Date: 4/16/19

Printed Name: Chitra Edwin

April 16, 2019

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Phyllis Gardner Date: April 16, 2019

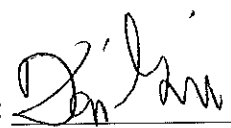
Printed Name: Phyllis Gardner

Valerie Guild

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 4/16/19

Printed Name: 

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: _____

Date: _____

Printed Name: _____

VIVIAN LEE

April 16, 2019

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Helen Maslocka Date: 4-16-19

Printed Name: Helen MASLOCKA

April 16, 2019

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: John McKew Date: 4/23/19

Printed Name: John McKew

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.


Signature:  Date: 4/16/19

Printed Name: MARK MO ASSER

April 16, 2019

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

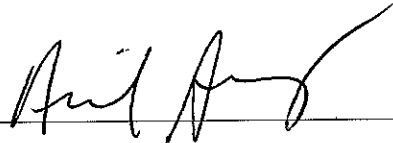
Signature:  Date: 4/16/18

Printed Name: Matthew A. Spear

April 16, 2019

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 4/16/2019

Printed Name: NEIL SPECTOR

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

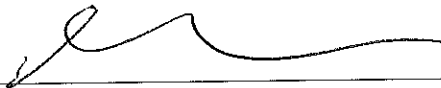
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 4/16/19

Printed Name: Kristine Strider

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: Apr 16 2019

Printed Name: GRANT WILLIAMS

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 4/18/19

Printed Name: J Bechtold

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.


Signature: Leila Alland Date: 23 Mar 2019

Printed Name: Leila Alland

March, 18 2019

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 3/19/2019

Printed Name: Roy Casan

To: Ian Thorpe
ian.thorpe@gd.t.com

FY19.2 Product Development Panel – 1 (PDP-1)
March, 18 2019

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Phyllis Gardner Date: 3/18/2019

Printed Name: Phyllis Gardner

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

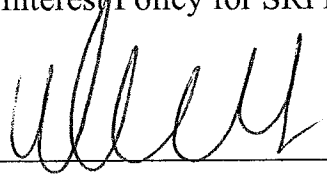
Signature:  Date: 3/24/19

Printed Name: 

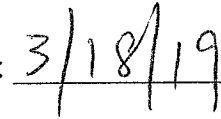
**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

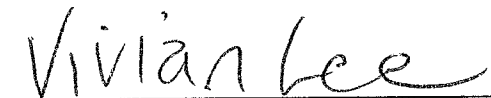
Signature: _____

_____

Date: _____



Printed Name: _____

_____

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Helen Maslock Date: 3-23-19

Printed Name: Helen MASLOCK

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

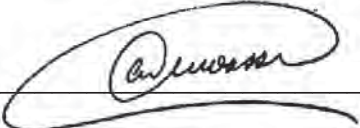
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: John C. McKew Date: 3/19/19

Printed Name: John C. McKew

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 3/18/2019

Printed Name: Mark M. Moasser

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: _____

Date: _____

3/19/19

Printed Name: _____

Matthew A. Spear

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 3/25/2019

Printed Name: NEIL SPECTOR

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Kristine Swiderek Date: 3/18/19

Printed Name: Kristine Swiderek

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

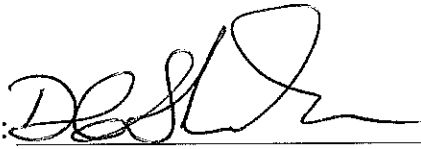
Signature:  Date: March 19 2019

Printed Name: Grant W. Williams

April 17-18, 2019

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 18 Apr '19

Printed Name: David G. Shoemaker

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.


Signature:  Date: 4/18/19

Printed Name: Kelly Bolton

April 17-18, 2019

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

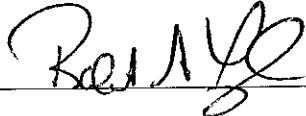
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 04/18/19

Printed Name: Renzo Conitto, MD

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 4/18/19

Printed Name: Robert Figlin

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

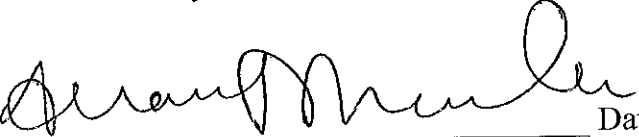
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Mara Ginskoora Date: 4-18-19

Printed Name: Mara Ginskoora

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

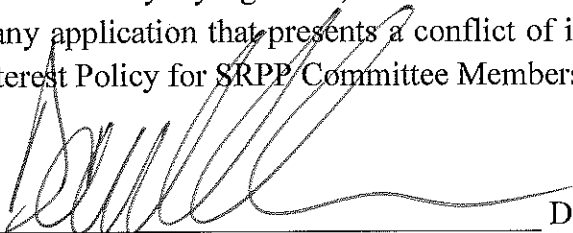
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 4/18/2019

Printed Name: ANANT MADABHUSHI

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

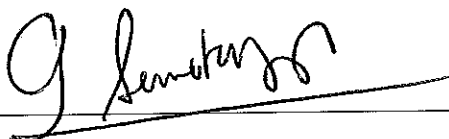
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 4-18-2019

Printed Name: Daniel L. Mooradian

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 4/18/19

Printed Name: GINETTE SORREDO

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Sandra Silberman Date: 18 April 2019

Printed Name: Sandra Silberman

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

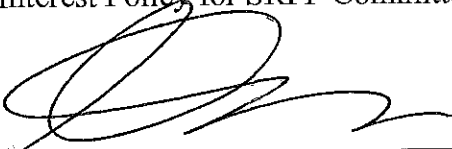
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 4/18/19

Printed Name: DIANE AMY TROTTER

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 4/18/19

Printed Name: George Tennor

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 4.18.19

Printed Name: COLIN TURNBULL

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Meryl Weinreb Date: 4/18/2019

Printed Name: MERYL WEINREB

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: _____

Date: 19 Mar '19

Printed Name: _____

David G. Shoemaker

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 3/27/2019

Printed Name: Kelly Bolton

March, 19 2019

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: _____

Date: _____

March 19, 2019

Printed Name: _____

Renzo Conelto, MD

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 3/19/19

Printed Name: Robert Figlin MD.

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Mara Ginsberg Date: 3/19/19

Printed Name: Mara Ginsberg

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 3/21/2019

Printed Name: Anant Madabhushi

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: _____

Date: _____

Printed Name: _____

Daniel L. Mooradian

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

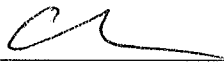
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Ginette Serrero Date: 3/20/2019

Printed Name: Ginette Serrero

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 3/25/19

Printed Name: Chirag Shu

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

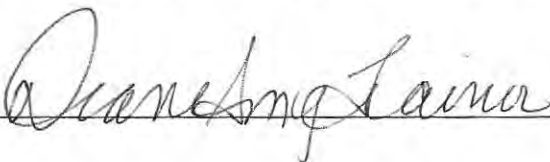
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: *Sandra Silberman* Date: 26 March 2019

Printed Name: Sandra Silberman

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

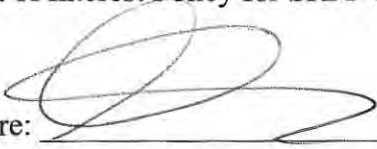
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 3/20/19

Printed Name: Diane Ann Trevor

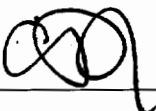
**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Date: 3/22/19Printed Name: Gordon Thayer

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 3, 20 .19

Printed Name: COLIN TURNBULL

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Meryl Weiner Date: 3/20/19

Printed Name: MERYL WEINER

Conflicts of Interest Disclosure
Product Development Research 19.2 Applications
(Product Development Research Cycle 19.2 Awards Announced at August 21, 2019,
Oversight Committee Meeting)

The table below lists the conflicts of interest (COIs) identified by peer reviewers, Program Integration Committee (PIC) members, and Oversight Committee members on an application-by-application basis. Applications reviewed in Product Development Research Cycle 19.2 include *Company Relocation Product Development Awards*, *Seed Awards for Product Development Research*, and *Texas Company Product Development Awards*. All applications with at least one identified COI are listed below; applications with no COIs are not included. It should be noted that an individual is asked to identify COIs for only those applications that are to be considered by the individual at that particular stage in the review process. For example, Oversight Committee members identify COIs, if any, with only those applications that have been recommended for the grant awards by the PIC. COI information used for this table was collected by General Dynamics Information Technology, CPRIT's third party grant administrator, and by CPRIT.

Application ID	Applicant/PI	Institution	Conflict Noted
Applications considered by the PIC and Oversight Committee			
DP190066	Ravi Srinivasan	OncoNano Medicine	W. Montgomery
Applications not considered by the PIC or Oversight Committee			
DP190067	Labros Digonis	Insybio Inc.	J. McKew
DP190073	Imran Alibhai	Tvardi Therapeutics, Inc	S. Silberman
DP190093	Ganesh Raj	EtiraRx, LLC	M. Rudoltz; S. Silberman
DP190099	Laura Indolfi	PanTher Therapeutics, Inc	M. Rudoltz

**Peer Review Certification of Non-Participant in
Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
Panel: 19.2 Prevention DI
Meeting: Teleconference**

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/Initials*

GDIT Approval:

Name (PRINT): Aaron Chumbris

Signature: *Aaron Chumbris*

Date: 7-8-19

Comments:

No Additional COIs

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

**Peer Review Certification of Non-Participant in
Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
Panel: 19.2 Prevention Panel-1
Meeting: Onsite Meeting**

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/Initials*
5/21	PP190061	Savas, Lara	The University of Texas Health Science Center at Houston	Brandt, Heather	<i>HuBrandt</i>	AMC
5/21	PP190045	Foxhall, Lewis	The University of Texas M. D. Anderson Cancer Center	Brandt, Heather	<i>HuBrandt</i>	AMC
5/21	PP190045	Foxhall, Lewis	The University of Texas M. D. Anderson Cancer Center	Knight, Jennifer	<i>Jennifer Knight</i>	AMC
5/21	PP190055	He, Meizi	The University of Texas at San Antonio	Ahluwalia, Jasjit	<i>Jasjit Ahluwalia</i>	AMC
5/21	PP190055	He, Meizi	The University of Texas at San Antonio	Brandt, Heather	<i>HuBrandt</i>	AMC
5/21	PP190057	Byrd, Theresa	Texas Tech University Health Sciences Center	Eriksen, Michael	Reviewer not present at meeting	AMC
5/21	PP190075	Flash, Charlene	Legacy Community Health Services	Brandt, Heather	<i>HuBrandt</i>	AMC

GDIT Approval:

Name (PRINT):

Aaron Chumbris

Signature:

Ch Ch

Date:

5-21-19

Comments:

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

**Peer Review Certification of Non-Participant in
Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
Panel: 19.2 Prevention Panel-1
Meeting: Onsite Meeting**

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/Initials*

GDIT Approval:

Name (PRINT):

Aaron Chumbris

Signature:

AC

Date:

5-22-19

Comments:

No Additional Cols

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Stephen W. Wyatt Date: 07/09/19

Printed Name: Dr Stephen Wyatt, DMD, MPH

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

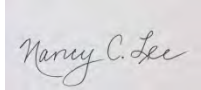
Signature: 

Date: July 8, 2019

Printed Name: Ross C. Brownson

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  _____ Date: July 9, 2019 _____

Printed Name: _____ Nancy C. Lee _____


**Peer Review Certification of Non-Participant in
Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
Panel: 19.2 Prevention Review Council Meeting
Meeting: Teleconference**

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/ Initials*

GDIT Approval:

Name (PRINT): Aaron Chumbris

Signature: 

Date: 7-8-19

Comments:

No Additional COIs

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Stephen W. Wyatt Date: 07/09/19

Printed Name: Dr Stephen Wyatt, DMD, MPH

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

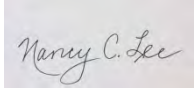
Signature: 

Date: July 8, 2019

Printed Name: Ross C. Brownson

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  _____ Date: July 9, 2019 _____

Printed Name: Nancy C. Lee _____

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Ross C. Brownson Date: 5-22-2019

Printed Name: Ross C. Brownson

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

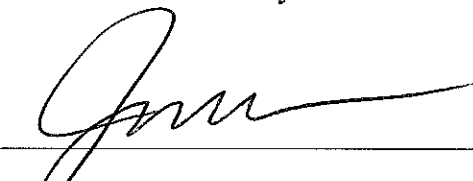
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Nancy Lee Date: 5/22/19

Printed Name: Nancy Lee

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5/22/19

Printed Name: JASJITS. AHLUWALIA

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

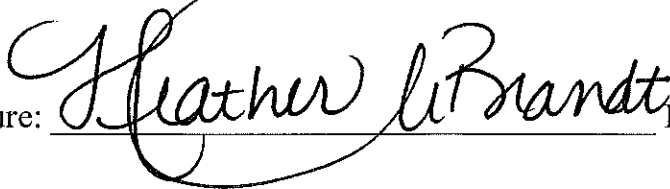
Signature: Kevin T. Brady Date: 5/22/2019

Printed Name: Kevin T. Brady

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:



Date:

5/22/19

Printed Name:

Heather M Brandt

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

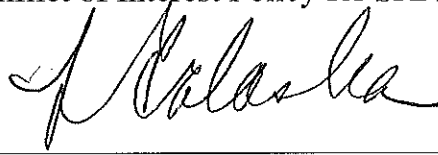
Signature:  Date: 5/22/19

Printed Name: FRANK S. BRIGHT

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: _____



Date: _____

5/22/19

Printed Name: _____

L. Galaska

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

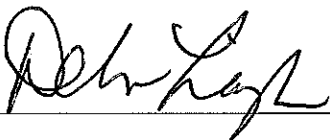
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Jennifer Redmond Knight Date: 5/22/19

Printed Name: Jennifer Redmond Knight

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

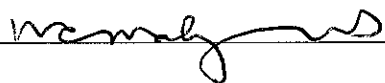
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5/22/19

Printed Name: DeAnn Lazonich

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5/22/19

Printed Name: Martin C. Mahoney MD PhD

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: David C. Morrow Date: 5/22/2019

Printed Name: DAVID C. MORROW

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Lillian M. Nail Date: 5/22/19

Printed Name: Lillian M. Nail

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

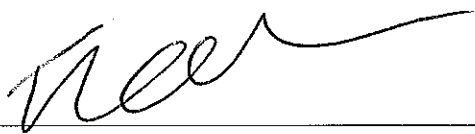
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Charlotte Naschinski Date: 5-22-19

Printed Name: Charlotte Naschinski

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

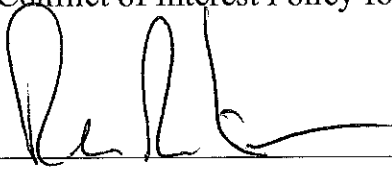
Signature:  Date: 5/22/2019

Printed Name: Folakeemi Odedina

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: _____



Date: _____

5/22/19

Printed Name: _____

Bob R. Ter

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Jane Baker Segelken Date: 05-22-2019

Printed Name: Jane Baker Segelken

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5.22.19

Printed Name: ANDREW SUSSMAN

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Karen Patricia Wittars PhD Date: 5/22/2019

Printed Name: Karen Patricia Wittars PhD

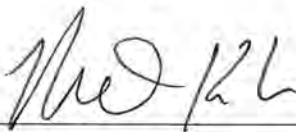
Conflicts of Interest Disclosure
Prevention Cycle 19.2 Applications
(Prevention Cycle 19.2 Awards Announced at August 21, 2019, Oversight Committee Meeting)

The table below lists the conflicts of interest (COIs) identified by peer reviewers, Program Integration Committee (PIC) members, and Oversight Committee members on an application-by-application basis. Applications reviewed in Prevention Cycle 19.2 include *Evidence Based Cancer Prevention Services*, *Expansion of Cancer Prevention Services to Rural and Medically Underserved Populations*, *Tobacco Control and Lung Cancer Screening*; and *Dissemination of CPRIT-funded Cancer Control Interventions*. All applications with at least one identified COI are listed below; applications with no COIs are not included. It should be noted that an individual is asked to identify COIs for only those applications that are to be considered by the individual at that particular stage in the review process. For example, Oversight Committee members identify COIs, if any, with only those applications that have been recommended for the grant awards by the PIC. COI information used for this table was collected by General Dynamics Information Technology, CPRIT's third party grant administrator, and by CPRIT.

Application ID	Applicant/PI	Institution	Conflict Noted
Applications considered by the PIC and Oversight Committee			
PP190061	Savas, Lara	The University of Texas Health Science Center at Houston	Brandt, Heather
PP190055	He, Meizi	The University of Texas at San Antonio	Ahluwalia, Jasjit; Brandt, Heather
PP190075	Flash, Charlene	Legacy Community Health Services	Brandt, Heather
Applications not considered by the PIC or Oversight Committee			
PP190045	Foxhall, Lewis	The University of Texas M.D. Anderson Cancer Center	Brandt, Heather; Knight, Jennifer
PP190057	Byrd, Theresa	Texas Tech University Health Sciences Center	Eriksen, Michael

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 7-12-2019

Printed Name: Richard Kolodner

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: T. Curran Date: 7/12/19

Printed Name: Tom Curran

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 7/12/2019

Printed Name: Sanjiv Gambhir

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Peter Jones Date: 7/12/19

Printed Name: PETER JONES

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 7/12/19

Printed Name: Richard J. O'Reilly, MD

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: Aug 1 2019

Printed Name: Carol Prives

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Thomas A. Sellers Date: 7/12/19

Printed Name: Thomas A. Sellers

**Peer Review Certification of Non-Participant in
Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
Panel: Recruitment FY19 Cycle 10
Meeting: Teleconference**

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/Initials*

GDIT Approval:

Name (PRINT): Viniceia Carter

Signature: Viniceia Carter

Date: 5-31-19

Comments:

No additional comments

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5/31/2019

Printed Name: Richard Kolodner

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: May 31, 2019

Printed Name: Peter A. Jones

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5/31/19

Printed Name: Richard J. O'Reilly, MD

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: June 4, 2019

Printed Name: _____

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Thomas A. Sellers Date: 5/31/19

Printed Name: Thomas A. Sellers

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Margaret Tempore Date: 5/31/19

Printed Name: Margaret Tempore

**Peer Review Certification of Non-Participant in
Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
Panel: Recruitment FY19 Cycle 11
Meeting: Teleconference**

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/Initials*
6/24/2019	RR190069	Kuspa, Adam	Baylor College of Medicine	O'Reilly, Richard	Verified telephonically by GDIT	EMD
6/24/2019	RR190089	Kuspa, Adam	Baylor College of Medicine	Brown, Myles	Verified telephonically by GDIT	EMD

GDIT Approval:

Name (PRINT): Feder DeLeon
Signature: [Signature]
Date: 6/24/2019

Comments:

Additional COI declared

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 6/24/19

Printed Name: Richard Golodner Ph.D.

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 6/24/19

Printed Name: Myles Brown

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 06/24/2019

Printed Name: Peter A. Jones

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 6/25/19

Printed Name: Richard O'Reilly, MD

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: June 24, 2019

Printed Name: Carol Prives

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

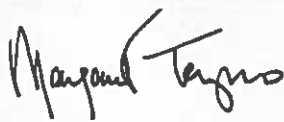
Signature: TL A. Sellers ^{VRP} Date: 6/24/19

Printed Name: Thomas A. Sellers

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: _____



Date: _____

6/24/19

Printed Name: _____

Margaret Tempero

**Peer Review Certification of Non-Participant in
Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
Panel: Recruitment FY19 Cycle 12
Meeting: Teleconference**

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/Initials*

GDIT Approval:

Name (PRINT): Katia Garcia-Crespo

Signature: Katia Garcia-Crespo

Date: 8-5-2019

Comments:

No additional COIs

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application.

7/9/2019 2:39:24 PM

Procurement Sensitive Document
Do not copy or circulate without written permission

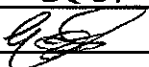
Page 1 of 1

**Peer Review Certification of Non-Participant in
Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
Panel: Recruitment FY19 Cycle 12
Meeting: Teleconference**

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/Initials*

GDIT Approval:

Name (PRINT): Eder DeLeon
 Signature: 
 Date: 7/11/2016

Comments:

No additional COI's

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 8-5-2019

Printed Name: Richard Kulodner

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: Aug 5, 2019

Printed Name: Tom CURRAN

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 8/5/2019

Printed Name: Sanjiv Sam Gambhir

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 08/05/2019

Printed Name: Peter A. Jones

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: August 5, 2019

Printed Name: Carol Prives

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Thomas A. Sellers Date: 8/6/19

Printed Name: Thomas A. Sellers

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Margaret Tempero Date: 08/05/2019

Printed Name: Margaret Tempero, MD

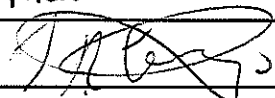
Conflicts of Interest Disclosure
Academic Research Recruitment Cycles 19.10-19.12 Applications
(Academic Research Recruitment Cycles 19.10-19.12 Awards
Announced at August 21, 2019, Oversight Committee Meeting)

The table below lists the conflicts of interest (COIs) identified by peer reviewers, Program Integration Committee (PIC) members, and Oversight Committee members on an application-by-application basis. Applications reviewed in Academic Research Recruitment Cycle 19.10-11 include *Recruitment of Rising Stars*; *Recruitment of Established Investigators*; and *Recruitment of First-Time, Tenure-Track Faculty Members*. All applications with at least one identified COI are listed below; applications with no COIs are not included. It should be noted that an individual is asked to identify COIs for only those applications that are to be considered by the individual at that particular stage in the review process. For example, Oversight Committee members identify COIs, if any, with only those applications that have been recommended for the grant awards by the PIC. COI information used for this table was collected by General Dynamics Information Technology, CPRIT's third party grant administrator, and by CPRIT.

Application ID	Applicant/PI	Institution	Conflict Noted
Applications considered by the PIC and Oversight Committee			
RR190069	Adam Kuspa	Baylor College of Medicine	Richard O'Reilly
RR190089	Adam Kuspa	Baylor College of Medicine	Myles Brown
Applications not considered by the PIC or Oversight Committee			
No conflicts reported.			

**Peer Review Certification of Non-Participant in
Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
Panel: 19.2 Basic Cancer Research 1
Meeting: Onsite Meeting**

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/Initials*
5-24-19	RP190486	Pertsemlidis, Alexander	The University of Texas Health Science Center at San Antonio	Conejo-Garcia, Jose	Application not discussed	VRC
5-24-19	RP190528	Zhang, Nu	The University of Texas Health Science Center at San Antonio	Conejo-Garcia, Jose	Application not discussed	VRC
5-24-19	RP190645	Liu, Aimin	The University of Texas at San Antonio	Conejo-Garcia, Jose		VRC
5-24-19	RP190656	Kulkarni, Smita	Texas Biomedical Research Institute	Conejo-Garcia, Jose	Application not discussed	VRC
5-24-19	RP190659	Romero Uribe, Gabriela	The University of Texas at San Antonio	Conejo-Garcia, Jose	Application not discussed	VRC

GDIT Approval:

Name (PRINT): Viniceia Carter
 Signature: Viniceia Carter
 Date: 5-24-19

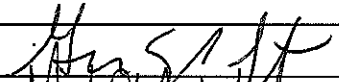
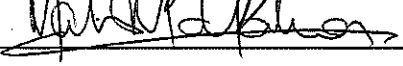
Comments:

Additional COIs Declared

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

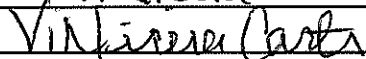
**Peer Review Certification of Non-Participant in
Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
Panel: 19.2 Basic Cancer Research 1
Meeting: Onsite Meeting**

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/Initials*
5-24-19	RP190570	RP190570 Leng, Han	University of Texas Health Science Center at Houston	George Prendergast		VRC
5-24-19	RP190599 RP190559	Johnson, Jane	The University of Texas Southwestern Medical Center	McMahon, Martin		VRC

GDIT Approval:

Name (PRINT): Viniceia Carter

Signature: 

Date: 5-24-19


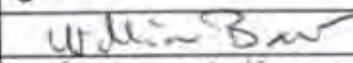
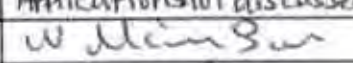
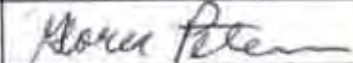
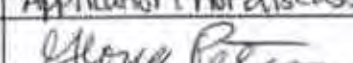
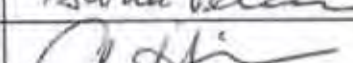
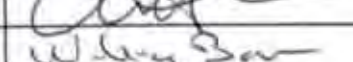
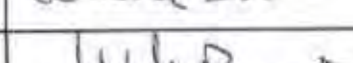
Comments:

Additional COIs Declared

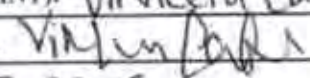
*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

**Peer Review Certification of Non-Participant in
Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
Panel: 19.2 Cancer Prevention Research
Meeting: Onsite Meeting**

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/Initials*
5-23-19	RP190513	Hwang, Jessica	The University of Texas M. D. Anderson Cancer Center	Emmons, Karen		VRC
5-23-19	RP190526	KANWAL, FASIIHA	Baylor College of Medicine	Barlow, William		VRC
5-23-19	RP190543	Biswas, Swati	The University of Texas at Dallas	Emmons, Karen	Application not discussed	VRC
5-23-19	RP190543	Biswas, Swati	The University of Texas at Dallas	Mucci, Lorelei	Application not discussed	VRC
5-23-19	RP190584	Thrift, Aaron	Baylor College of Medicine	Barlow, William		VRC
5-23-19	RP190585	Beretta, Laura	The University of Texas M. D. Anderson Cancer Center	Petersen, Gloria		VRC
5-23-19	RP190625	Kim, Hye-Chung	Texas A&M University	Schnoll, Robert	Application not discussed	VRC
5-23-19	RP190633	Hassan, Manal	The University of Texas M. D. Anderson Cancer Center	Petersen, Gloria		VRC
5-23-19	RP190633	Hassan, Manal	The University of Texas M. D. Anderson Cancer Center	Haiman, Christopher		VRC
5-23-19	RP190639	Zhu, Hao	The University of Texas Southwestern Medical Center	Barlow, William		VRC
5-23-19	RP190644	Singal, Amit	The University of Texas Southwestern Medical Center	Barlow, William		VRC

GDIT Approval:

Name (PRINT): Viniceia Carter
 Signature: 
 Date: 5-23-19

Comments:

No additional COLs

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application.

**Peer Review Certification of Non-Participant in
Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
Panel: 19.2 Cancer Prevention Research
Meeting: Onsite Meeting**

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/Initials*

GDIT Approval:

Name (PRINT): Viniceia Carter
 Signature: Viniceia Carter
 Date: 5-23-19

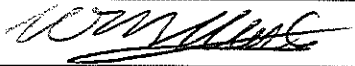
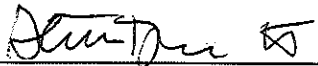
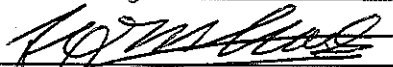

Comments:

No additional COIs

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application


**Peer Review Certification of Non-Participant in
Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
Panel: 19.2 Clinical/Translational Cancer Research
Meeting: Onsite Meeting**

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/Initials*
5/21/19	RP190519	Zhang, Chengcheng	The University of Texas Southwestern Medical Center	Kast, W. Martin		VRC
5/21/19	RP190519	Zhang, Chengcheng	The University of Texas Southwestern Medical Center	Engelhard, Victor	Not present/attending meeting	VRC
5/21/19	RP190552	Kelly, Ronan	Baylor Scott & White Healthcare	Kast, W. Martin	Application not discussed	VRC
5/21/19	RP190610	O'Donnell, Kathryn	The University of Texas Southwestern Medical Center	Dubinett, Steven		VRC
5/21/19	RP190613	Wang, Rongfu	The Methodist Hospital Research Institute	Kast, W. Martin		VRC
5/21/19	RP190613	Wang, Rongfu	The Methodist Hospital Research Institute	Sette, Alessandro		VRC
5/21/19	RP190613	Wang, Rongfu	The Methodist Hospital Research Institute	Engelhard, Victor	Not present/attending meeting	VRC

GDIT Approval:

Name (PRINT): Viniceia Carter

Signature: 

Date: 5-21-19

Comments:

Additional COI for Steven Dubinett for RP190540 (see pg. 2)

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

**Peer Review Certification of Non-Participant in
Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
Panel: 19.2 Clinical/Translational Cancer Research
Meeting: Onsite Meeting**

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/Initials*
5-21-19	RP190540	Futreal, Andy	University of TX MD Anderson Cancer Center	Dubinet, Steven	<i>[Signature]</i>	VRC

GDIT Approval:

Name (PRINT): Viniceia Carter

Signature: *[Signature]*

Date: 5-21-19

Comments:

see pg. 1

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

**Peer Review Certification of Non-Participant in
Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
Panel: 19.2 Imaging Technology and Informatics
Meeting: Onsite Meeting**

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name /Initials*
5/20/19	RP190631	Yuan, Joshua	Texas AgriLife Research	Basilion, James	Application Not Discussed	VRL

GDIT Approval:

Name (PRINT): V. Nicolson Carter
 Signature: V. Nicolson Carter
 Date: 5/20/19

Comments:

No additional COIs

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form out of the panel room during the discussion of the application.

**Peer Review Certification of Non-Participant in
Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
Panel: 19.2 Imaging Technology and Informatics
Meeting: Onsite Meeting**

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/ Initials*

GDIT Approval:

Name (PRINT): Viniceia Carter
 Signature: Viniceia Carter
 Date: 5/20/2019

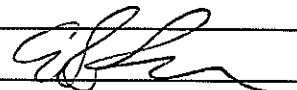
Comments:

No additional COIs

*A GDIT representative will add their name and initials to this form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application.

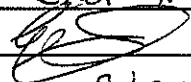
**Peer Review Certification of Non-Participant in
Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest
Panel: 19.2 Cancer Biology
Meeting: Onsite Meeting**

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/Initials*
5/21/2019	RP190611	Jayaraman, Arul	Texas A&M University	Fearon, Eric		Eder DeLeon MD

GDIT Approval:

Name (PRINT): Eder Martin DeLeon

Signature: 

Date: 5/21/2019

Comments:

NO additional COIS

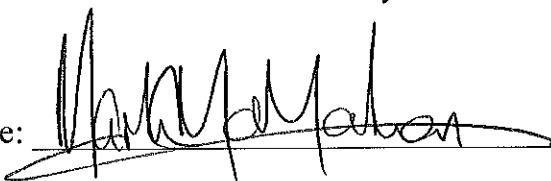
*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

May 24, 2019

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: _____

Date: 05/24/2019


Printed Name: _____

MARTIN MCMAHON

May 24, 2019

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5/24/19

Printed Name: Jean Y J Wang

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

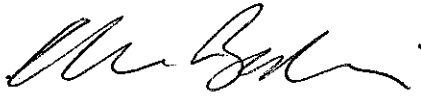
Signature: Alexander Anderson Date: 05/30/19

Printed Name: Alexander Anderson

May 24, 2019

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

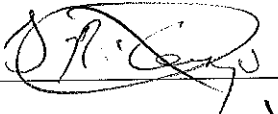
Signature:  Date: 5/29/2019

Printed Name: ALAN BALMAIN

May 24, 2019

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5/24/2019

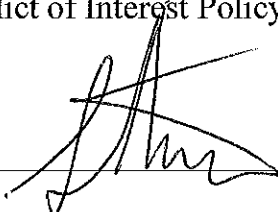
Printed Name: JOSE CONEJO-GARCIA

May 24, 2019

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: _____



Date: _____

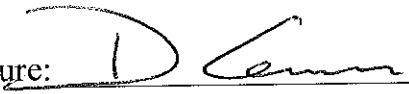
5/24/19

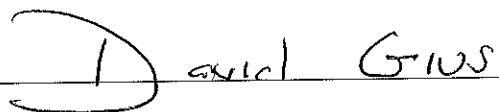
Printed Name: _____

Steve Fiering

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5/24/2019

Printed Name: 

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

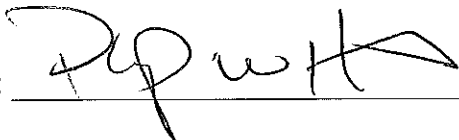
Signature:  Date: 6/4/19

Printed Name: KEVIN HARGIS

May 24, 2019

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: May 24 2019

Printed Name: Phil Hands

May 24, 2019

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: David P. Hoochens Date: 5/24/2019

Printed Name: David P. Hoochens

May 24, 2019

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

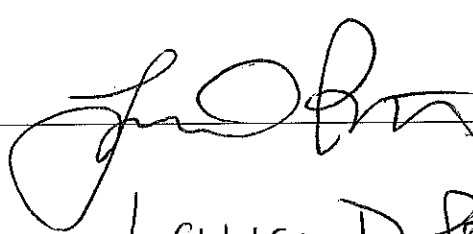
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5/24/19

Printed Name: David L Manley

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

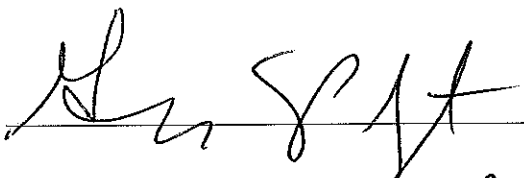
Signature:  Date: 5/24/2019

Printed Name: Laura D. Porter

May 24, 2019

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5/24/19

Printed Name: GEORGE C. PRENDERGAST

May 24, 2019

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

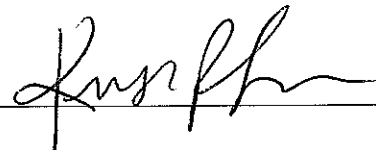
Signature: Heide Schattan Date: May 24 2019

Printed Name: HEIDE SCHATTEN

May 24, 2019

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

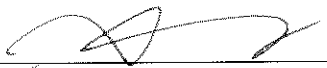
Signature:  Date: 5/24/19

Printed Name: Kristin Swanson

May 24, 2019

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5/24/19

Printed Name: Xiao-Fan Wang

May 24, 2019

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

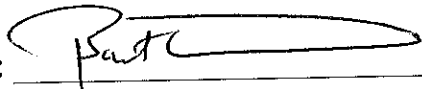
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5/24/19

Printed Name: Robert Wechsler-Raya

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 05/24/19

Printed Name: BART WILLIAMS

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Peter Jones Date: 5/21/19

Printed Name: PETER JONES

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Steven Belinsky Date: 5/21/19

Printed Name: Steven Belinsky

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

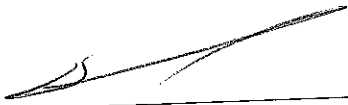
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Heather Christak Date: 5/21/19

Printed Name: Heather Christak

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: May 21, 2019

Printed Name: DANIEL DE CARVALHO

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 21 May, 2019

Printed Name: Eric R. Fearon

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5/21/19

Printed Name: Amir Goldkorn

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

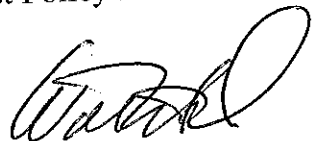
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: GL Greene Date: 5/21/19

Printed Name: Geoffrey L Greene

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

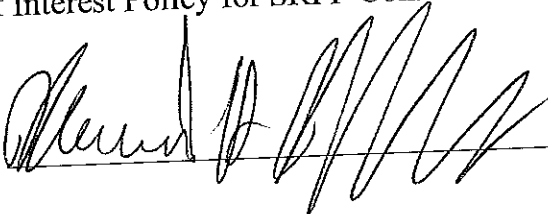
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5/21/19

Printed Name: William Harts

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

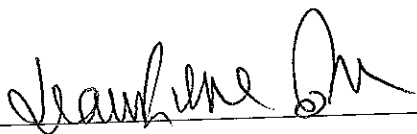
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 05/21/2019

Printed Name: Michael A. Hollingsworth

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

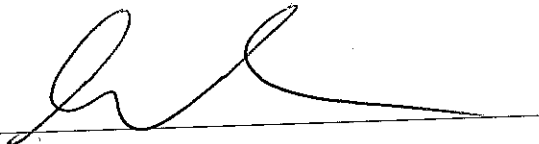
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5/21/19

Printed Name: JEAN-PIERRE ISSA

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5/21/19

Printed Name: Mossman

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

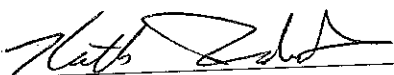
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5/21/2018

Printed Name: Nouri Neamat

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5/21/19

Printed Name: Keith Robertson

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Anne R Tonackel Date: May 21, 2019

Printed Name: Anne R Tonackel

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

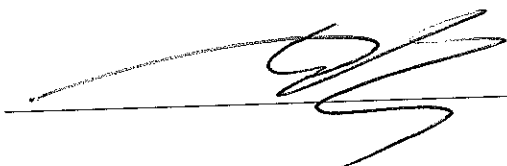
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Carol Vallett Date: 5-21-19

Printed Name: CAROL VALLETT

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5-21-19

Printed Name: Ting Wang

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Zena Werb Date: 5/21/19

Printed Name: Zena Werb

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: TL A Sell Date: 5/23/19

Printed Name: Thomas A. Sellers

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: William Barlow Date: 23 May 2019

Printed Name: William Barlow

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

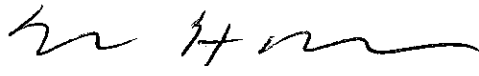
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Brian Booker Date: 5/23/2019

Printed Name: Brian Booker

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

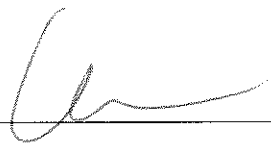
Signature:  Date: 5-23-19

Printed Name: Thomas, H. Brandon

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: _____



Date: _____

5/23/19

Printed Name: _____

Karen E. Moore

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Brooke Fridley Date: 5/23/2019

Printed Name: BROOKE FRIDLEY

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Michal Judith Gillman Date: 05/23/2019

Printed Name: Michal-Judith Gillman

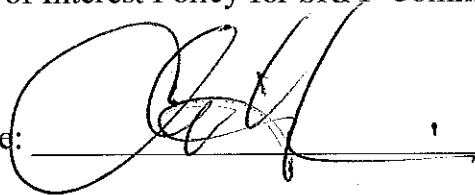
[Handwritten mark]

[Handwritten mark]

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

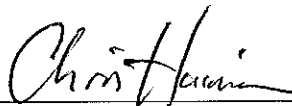
Signature: _____



Date: _____

5/28/19

Printed Name: _____



**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Nagi B. Kumar Date: 5/23/19

Printed Name: NAGI B. KUMAR.

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Lawrence H. Kushi Date: 5/23/2019

Printed Name: Lawrence H. Kushi

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5/31/19

Printed Name: Christopher Li

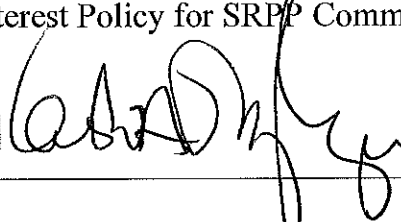
**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: _____


Date: _____

Printed Name: _____


Katherine A. McGlynn

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5/23/19

Printed Name: Lorelei Macci

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

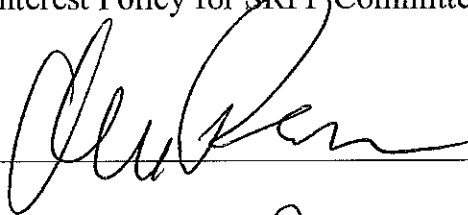
Signature:  Date: 5/23/19

Printed Name: Andrew Olshan

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: _____



Date: _____

5/23/19

Printed Name: _____

Alex Parker

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Electra D. Paskett Date: 5-23-19

Printed Name: Electra D. Paskett

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

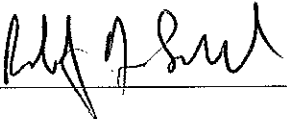
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5/23/19

Printed Name: Gloria Petersen

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5/23/19

Printed Name: Robert Schell

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5/23/19

Printed Name: Kirk Wengensteen

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5/21/19

Printed Name: RICHARD J. O'REILLY, MD

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Marquet Tempers Date: 5/21/19

Printed Name: Marquet Tempers

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5/21/2019

Printed Name: Steven Balk

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Paul A. Bunn MD Date: 5/21/2019

Printed Name: PAUL A. BUNN MD

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 06/13/19

Printed Name: Dennis A. Carson, M.D.

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

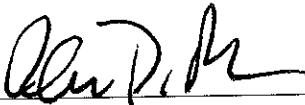
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5/21/19

Printed Name: Walter Currie MD

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.


Signature:  Date: 5/21/19

Printed Name: John D. Pearson

May 21, 2019

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5-21-19

Printed Name: STEVEN DUBINETT

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

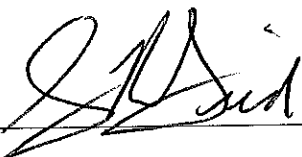
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5/21/2019

Printed Name: OLIVERA J. FINN

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5/21/19

Printed Name: Samantha B. Guild

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

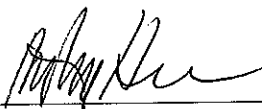
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Howard Hochster Date: 5/21/19

Printed Name: H HOCHSTER

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

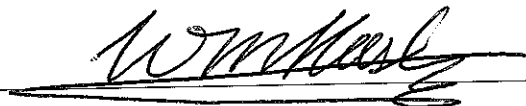
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5/21/2019

Printed Name: MICKEY HU

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5-21-19

Printed Name: W. MARTIN KAST

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Herbert Kim Lye Date: 5/21/2019
Printed Name: HERBERT Kim LYERLY

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Robert Mesloh Date: 5/21/19

Printed Name: ROBERT MESLOH

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Charles Mulligan Date: 2021 May 19

Printed Name: CHARLES MULLIGAN

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

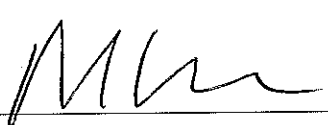
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Donna Niedzwiecki Date: May 21, 2019

Printed Name: Donna Niedzwiecki

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5/21/19

Printed Name: R. PARKMAN

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

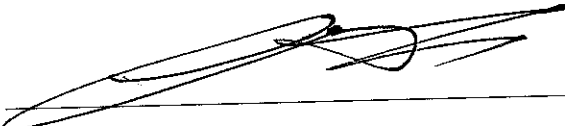
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: SMell Date: 5/21/2019

Printed Name: Simon N Powell

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5/21/19

Printed Name: Garth Powie

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Michael Prados Date: 05/21/2019

Printed Name: MICHAEL PRADOS

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: _____

Date: _____

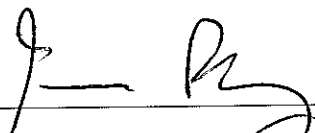
5/21/19

Printed Name: _____

Antoni Ribas

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5-21-19

Printed Name: J. Ritz

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Alexandro Sette Date: May 21st, 2019

Printed Name: ALESSANDRO SETTE

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

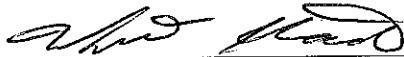
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Neil Shah Date: 5/21/19

Printed Name: NEIL SHAH

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5/21/19

Printed Name: WALTER STADLER

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Donna Nichols Threlkeld Date: 5/21/19

Printed Name: Donna Nichols Threlkeld

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

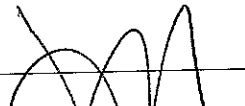
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

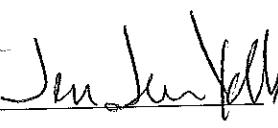
Signature: David Uehling Date: 5/21/19

Printed Name: David Uehling

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5/21/19

Printed Name: 

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5/20/19

Printed Name: MARTIN POUPER

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Anna M. Wu Date: May 20, 2019

Printed Name: Anna M. Wu

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Carolyn Anderson Date: 5/20/19

Printed Name: Carolyn Anderson

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

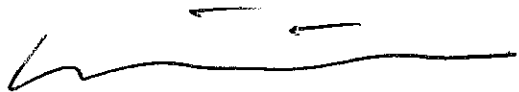
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5/20/19

Printed Name: James P. Basilion

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5/20/2019

Printed Name: Weibo Cai

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

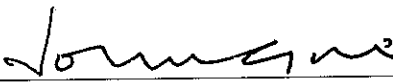
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5/20/2019

Printed Name: ARION F. CHATZIOANNOU

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

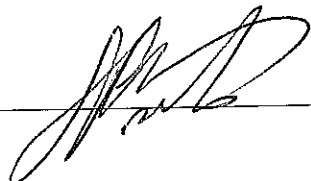
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5-20-2019

Printed Name: JOHN GORE

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5/20/19

Printed Name: Hossein Joduar

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5/20/2019

Printed Name: KATTESH V. KATTI

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

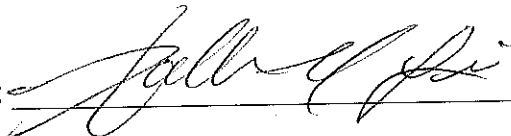
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5/20/19

Printed Name: LEWIS

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5/20/2019

Printed Name: Jonathan T.C. Liu

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Eva A. May Date: 5/20/19

Printed Name: Eva A. May

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5/20/19

Printed Name: Duane Mitchell

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Silda Nettles Date: 5/20/19

Printed Name: Silda Nettles

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**


I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: Mark L. Stolowitz Date: 5/20/19

Printed Name: MARK L. STOLOWITZ

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

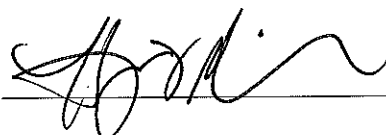
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5/20/19

Printed Name: Julie Sutcliffe

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

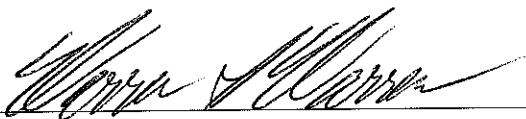
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5/20/19

Printed Name: Henry F. VanBracklen

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 5/20/19

Printed Name: Warren S. Warren

Peer Review Certification of Non-Participant in Evaluation of Individual Applications Because of Real or Apparent Conflict of Interest 2019 Cancer Prevention and Research Institute of Texas Academic Research Program


19.2 Scientific Review Council Meeting

Meeting Type: Teleconference Review

This is to certify that I was not present and did not participate in the review of the following applications:

Date	Application Number	Applicant/PD/PI Name	Applicant/PD/PI Organization	Reviewer Name	Reviewer Signature	GDIT Name/Initials*

GDIT Approval:

Name (PRINT): Eder Delcon
 Signature: 
 Date: 7/11/2019

Comments:

No additional CoI's

*A GDIT representative will add their name and initials to the form to acknowledge that the reviewer identified as a Conflict of Interest has signed the form and left the panel room during the discussion of the application

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 7-11-19

Printed Name: Richard Kolodner Ph.D.

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

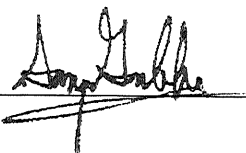
I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 7/16/19

Printed Name: Tom CURRAN

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 7/16/2019

Printed Name: Sanjiv Sam Gambhir

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 7/16/19

Printed Name: Peter A. Jones, PhD, DSc (hon)

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 7/19/19

Printed Name: Richard J. O'Reilly, MD

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature: _____  _____ Date: July 17, 2019

Printed Name: _____ Carol Prives

**POST REVIEW STATEMENT FOR CPRIT
SCIENTIFIC RESEARCH AND PREVENTION PROGRAM (SRPP)
COMMITTEE MEMBERS**

I understand the conflict of interest policies of CPRIT and have reported any conflicts of interest that I may have with respect to applications submitted to my assigned SRPP committee for review. By my signature, I affirm that I did not participate in the discussion or review of any application that presents a conflict of interest as defined by the CPRIT Conflict of Interest Policy for SRPP Committee Members.

Signature:  Date: 7/22/19

Printed Name: Thomas A. Sellers

Conflicts of Interest Disclosure
Academic Research Cycle 19.2 Applications
(Academic Research Cycle 19.2 Awards Announced at August 21, 2019, Oversight Committee Meeting)

The table below lists the conflicts of interest (COIs) identified by peer reviewers, Program Integration Committee (PIC) members, and Oversight Committee members on an application-by-application basis. Applications reviewed in Academic Research Cycle 19.2 include *Collaborative Action Program to Reduce Liver Cancer Mortality in Texas: Collaborative Action Center Award*; *Collaborative Action Program to Reduce Liver Cancer Mortality in Texas: Investigator-Initiated Research Awards*; *Core Facility Support Awards*; *High-Impact/High-Risk Research Awards*, and *Early Translational Research Awards*. All applications with at least one identified COI are listed below; applications with no COIs are not included. It should be noted that an individual is asked to identify COIs for only those applications that are to be considered by the individual at that particular stage in the review process. For example, Oversight Committee members identify COIs, if any, with only those applications that have been recommended for the grant awards by the PIC. COI information used for this table was collected by General Dynamics Information Technology, CPRIT's third party grant administrator, and by CPRIT.

Application ID	Applicant/PI	Institution	Conflict Noted
Applications considered by the PIC and Oversight Committee			
RP190610	Kathryn O'Donnell	The University of Texas Southwestern Medical Center	Steven Dubinett
RP190513	Jessica Hwang	The University of Texas M. D. Anderson Cancer Center	Karen Emmons
RP190570	Han Leng	The University of Texas Health Science Center at Houston	George Prendergast
Applications not considered by the PIC or Oversight Committee			
RP190486*	Alexander Pertsemlidis	The University of Texas Health Science Center at San Antonio	Jose Conejo-Garcia
RP190528*	Nu Zhang	The University of Texas Health Science Center at San Antonio	Jose Conejo-Garcia
RP190559	Jane Johnson	The University of Texas Southwestern Medical Center	Martin McMahon
RP190645	Aimin Liu	The University of Texas at San Antonio	Jose Conejo-Garcia

* Not Discussed

Academic Research Cycle 19.2

Application ID	Applicant/PI	Institution	Conflict Noted
RP190656*	Smita Kulkarni	Texas Biomedical Research Institute	Jose Conejo-Garcia
RP190659*	Gabriela Romero Uribe	The University of Texas at San Antonio	Jose Conejo-Garcia
RP190519	Chengcheng Zhang	The University of Texas Southwestern Medical Center	Victor Engelhard;W. Martin Kast
RP190540	Andy Futreal	The University of Texas M. D. Anderson Cancer Center	Steven Dubinett
RP190552*	Ronan Kelly	Baylor Scott & White Healthcare	W. Martin Kast
RP190613	Rongfu Wang	The Methodist Hospital Research Institute	Alessandro Sette;Victor Engelhard;W. Martin Kast
RP190611	Arul Jayaraman	Texas A&M University	Eric Fearon
RP190526	FASIHA KANWAL	Baylor College of Medicine	William Barlow
RP190543*	Swati Biswas	The University of Texas at Dallas	Karen Emmons; Lorelei Mucci
RP190584	Aaron Thrift	Baylor College of Medicine	William Barlow
RP190585	Laura Beretta	The University of Texas M. D. Anderson Cancer Center	Gloria Petersen
RP190625*	Hye-Chung Kum	Texas A&M University	Robert Schnoll
RP190633	Manal Hassan	The University of Texas M. D. Anderson Cancer Center	Christopher Haiman; Gloria Petersen
RP190639	Hao Zhu	The University of Texas Southwestern Medical Center	William Barlow
RP190644	Amit Singal	The University of Texas Southwestern Medical Center	William Barlow
RP190631*	Joshua Yuan	Texas AgriLife Research	James Basilion



CANCER PREVENTION & RESEARCH
INSTITUTE OF TEXAS

MEMORANDUM

To: OVERSIGHT COMMITTEE CHAIR WILL MONTGOMERY
From: WAYNE ROBERTS, CHIEF EXECUTIVE OFFICER
Subject: SECTION 102.1062 WAIVER—DONALD BRANDY
Date: AUGUST 8, 2018

Waiver Request and Recommendation

I request that the Oversight Committee approve a conflict of interest waiver for FY 2019 for Mr. Donald Brandy, CPRIT's Purchaser and HUB Coordinator, pursuant to Health & Safety Code Section 102.1062 "Exceptional Circumstances Requiring Participation." The Oversight Committee approved the same waiver for Mr. Brandy since FY 2015.

Mr. Brandy is not involved in the grant application or reporting process in his official capacity as purchaser of goods and services for the agency. However, the waiver ensures transparency regarding Mr. Brandy's relationship with some universities that receive CPRIT grants. Furthermore, CPRIT's Code of Conduct makes it clear that the agency's conflict of interest provisions apply to any expenditure of CPRIT funds. Although it is unlikely that CPRIT will procure goods and services from a university receiving grant funds from CPRIT, having the conflict of interest waiver in place ensures that Mr. Brandy can perform his duties. Together with the waiver's proposed limitations, adequate protections are in place to mitigate the opportunity for a conflict of interest to unduly influence agency purchases.

Background

Mr. Brandy serves as the agency purchaser, responsible for planning, organizing, coordinating, and preparing bid specifications and procurement documents to acquire goods and services from vendors and outside contractors used by the agency. The agency purchaser role requires little, if any, involvement with CPRIT's grant award process because CPRIT's grant award contracts are not vendor or outside service contracts.

At the time CPRIT hired Mr. Brandy, he requested approval to continue his outside employment as a referee for tennis tournaments held in and around Austin. In addition to refereeing for adult and junior-level tournaments, he serves occasionally as a referee for NCAA tennis matches held at area universities, including The University of Texas at Austin. The university athletic department pays Mr. Brandy for his services as an independent contractor when he referees collegiate matches.

CPRIT employees may engage in outside employment so long as the employment does not detract from the employee's ability to fulfill his or her responsibilities to CPRIT. Employees must receive written approval from the CEO to engage in outside employment and I notify the Audit Subcommittee regarding any approvals. I also annually report to the Oversight Committee all approved outside employment. I notified the Audit Subcommittee regarding my approval for Mr. Brandy's outside employment and the subcommittee first discussed it at the December 18, 2014, subcommittee meeting.

Exceptional Circumstances Requiring Mr. Brandy's Participation

To approve a conflict of interest waiver, the Oversight Committee must find that there are exceptional circumstances justifying the conflicted individual's participation in the review process or other expenditure of CPRIT funds.¹

This conflict of interest waiver is different than other waivers I have requested in that it is not seeking a waiver for actions related to CPRIT's grant review or grant monitoring process. As CPRIT's purchaser, I do not anticipate that Mr. Brandy will play any role in the review process for grant applications or grant reports. The purchaser deals only with agency procurement matters and has no influence over the grant award processes of the agency. To the extent that his outside employment necessitates involvement with university personnel, it is with collegiate athletic department staff that have no interaction with researchers working on or applying for grants. Nevertheless, if Mr. Brandy must be part of the review process or grant monitoring activities, he will comply with CPRIT's conflict of interest notification and recusal requirements.

However, as part of his official duties there may be circumstances requiring Mr. Brandy to procure goods or services on CPRIT's behalf from a university that has also employed him as a tennis referee. This is unlikely to occur; to date, CPRIT has had only one services contract (now closed) with an academic institution, Texas Tech University. However, as CPRIT's lead contact for agency purchases, Mr. Brandy should be able to perform his official duties as fully as possible. Any involvement with university athletic department personnel resulting from his outside employment is unlikely to be the same individuals at the university responsible for contracting with CPRIT.

Proposed Waiver and Limitations

In granting the waiver of the conflict of interest set forth in Health & Safety Code Section 102.106(c)(3), I recommend that the Oversight Committee permit Mr. Brandy to perform all duties assigned as purchaser, subject to the limitations stated below:

¹ CPRIT's Code of Conduct Section III.B(2) states that, "The conflict of interest statutory and administrative rule provisions **apply to any decision to commit CPRIT funds**, whether or not the commitment is part of the grant award process or to a Grant Applicant." (emphasis added)

1. Provide the Chief Operating Officer a list of universities that have used his services as referee during the past twelve months;
2. Notify the Chief Operating Officer prior to taking any action on a contract or other procurement document that would result in payment of CPRIT funds to a university on the list referenced above; and
3. The Chief Operating Officer, in conjunction with the CEO, Chief Compliance Officer and General Counsel, can review the circumstances and determine whether Mr. Brandy should be recused from involvement in the procurement.

Important Information Regarding this Waiver and the Waiver Process

- The Oversight Committee may amend, revoke, or review this waiver, including but not limited to the list of approved activities and duties and the limitations on duties and activities. Approval of any change to the waiver granted shall be by a vote of the Oversight Committee in an open meeting.
- CPRIT limits this waiver to the conflict of interest specified in this request. To the extent that Mr. Brandy has a conflict of interest not address in this waiver, then Mr. Brandy will follow the required notification and recusal process.



CANCER PREVENTION & RESEARCH
INSTITUTE OF TEXAS

MEMORANDUM

TO: OVERSIGHT COMMITTEE CHAIR WILL MONTGOMERY
FROM: WAYNE R. ROBERTS, CHIEF EXECUTIVE OFFICER
SUBJECT: SECTION 102.1062 WAIVER – DR. BECKY GARCIA
DATE: AUGUST 8, 2018

Waiver Request and Recommendation

I request that the Oversight Committee approve a conflict of interest waiver for FY 2019 for Program Integration Committee (“PIC”) member Dr. Becky Garcia, pursuant to Health & Safety Code Section 102.1062 “Exceptional Circumstances Requiring Participation.” Dr. Garcia was appointed to the advisory committee serving the Texas Health Improvement Network (“THIN”) in 2016. THIN is a statutorily-created program that is administratively attached to The University of Texas System. The waiver is necessary for Dr. Garcia to participate in CPRIT’s review process as a PIC member. Together with the waiver’s proposed limitations, adequate protections are in place to mitigate the opportunity for the award of grant funds to be driven by anything other than merit and established criteria. The waiver is the same as the waiver approved by the Oversight Committee for FY 2018.

Background

In 2015, the Legislature created the THIN with the purpose to “address urgent health care challenges and improve the health care system in this state and the nation and to develop, based on population health research, health care initiatives, policies, and best practices.” Texas Health and Safety Code § 118.051(a). By statute, THIN is administratively attached to the University of Texas System, which coordinates the program and provides administrative support. Texas Health and Safety Code § 118.054. Dr. Garcia, CPRIT Chief Prevention Officer, serves by appointment on the advisory council that advises THIN on health care needs of Texas.

Texas Health & Safety Code § 102.106(c)(1) holds that a professional conflict of interest exists if a PIC member is a member of any committee affiliated with an entity receiving or applying to receive money from CPRIT during the same grant cycle. The University of Texas System is composed of several institutions, many of which are current CPRIT grantees, including, but not limited to, UT Southwestern Medical Center, M.D. Anderson Cancer Center, and UT Health Science Center at San Antonio. Since Dr. Garcia serves on a committee administered by a university system that includes CPRIT grantees, a professional conflict of interest arises.

CPRIT's administrative rule § 702.17(3) authorizes the Oversight Committee to approve a waiver that applies for all activities affected by the conflict during the fiscal year.

Exceptional Circumstances Requiring Dr. Garcia's Participation

To approve a conflict of interest waiver, the Oversight Committee must find that there are exceptional circumstances justifying the conflicted individual's participation in the review process. The statute compels the Chief Prevention Officer's participation in the review process as a PIC member. The proposed waiver should be granted so that CPRIT may fulfill legislative intent that the Chief Prevention Officer serve as a PIC member. The proposed limitations will mitigate substantially any potential for bias.

Proposed Waiver and Limitations

In granting the waiver of the conflict of interest set forth in Section 102.106(c)(1), I recommend that the Oversight Committee permit Dr. Garcia to continue to perform the following activities and duties associated with CPRIT's review process subject to the stated limitations:

1. If THIN applies for a CPRIT grant award, Dr. Garcia must recuse herself from any discussion, review and vote related to the application.
2. If a principal investigator applying for CPRIT funds has also received funds from THIN for the same project, Dr. Garcia must recuse herself from any discussion, review and vote related to the application.

CPRIT's statute requires the Chief Compliance Officer to attend PIC meetings to document compliance with CPRIT's rules and processes, including adherence to this limitation. The Compliance Officer shall report to the Oversight Committee any violation of this waiver prior to the Oversight Committee's action on the PIC recommendations.

Important Information Regarding this Waiver and the Waiver Process

- The Oversight Committee may amend, revoke, or revise this waiver, including but not limited to the list of approved activities and duties and the limitations on duties and activities. Approval for any change to the waiver granted shall be by a vote of the Oversight Committee in an open meeting.
- CPRIT limits this waiver to the conflict of interest specified in this request. To the extent that Dr. Garcia has a conflict of interest with an application that is not the conflict identified in Section 102.106(c)(1), then Dr. Garcia will follow the required notification and recusal process.



CANCER PREVENTION & RESEARCH
INSTITUTE OF TEXAS

MEMORANDUM

To: OVERSIGHT COMMITTEE CHAIR WILL MONTGOMERY
From: WAYNE R. ROBERTS, CHIEF EXECUTIVE OFFICER
Subject: SECTION 102.1062 WAIVER – DR. JOHN HELLERSTEDT
Date: AUGUST 8, 2018

Waiver Request and Recommendation

I request that the Oversight Committee approve a conflict of interest waiver for FY 2019 for Program Integration Committee (PIC) member DSHS Commissioner Dr. John Hellerstedt, pursuant to Health & Safety Code Section 102.1062 “Exceptional Circumstances Requiring Participation.” The waiver is necessary for Commissioner Hellerstedt to participate in CPRIT’s review process as a PIC member. Together with the waiver’s proposed limitations, adequate protections are in place to mitigate factors other than merit and the established grant criteria affecting the award of grant funds. The waiver is the same as approved by the Oversight Committee for FY 2018.

Background

Governor Abbott appointed Dr. Hellerstedt as Commissioner of the Department of State Health Services (DSHS) on January 1, 2016. The DSHS Commissioner is a statutorily designated member of the PIC. As a PIC member, Commissioner Hellerstedt must exercise discretion related to whether to recommend applications proposed for grant awards to the Oversight Committee for final approval.

DSHS is a CPRIT grant recipient, which implicates conflict of interest concerns. Health & Safety Code Section 102.106(c)(3) mandates that a professional conflict of interest exists if a PIC member is an employee of an entity applying to receive or receiving CPRIT funds. Furthermore, CPRIT’s administrative rule 702.13(c) categorizes this type of professional conflict of interest as one that raises the presumption that the existence of the conflict may affect the impartial review of all other grant applications submitted pursuant to the same grant mechanism in the grant review cycle. A person involved in the review process that holds one of the conflicts included in the Section 702.13(c) “super conflict” category must be recused from participating in the “review, discussion, scoring, deliberation and vote on all grant applications competing for the same grant mechanism in the entire grant review cycle, unless a waiver has been granted...”

CPRIT’s administrative rule Section 702.17(3) authorizes the Oversight Committee to approve a waiver that applies for all activities affected by the conflict during the fiscal year.

Exceptional Circumstances Requiring Commissioner Hellerstedt's Participation

To approve a conflict of interest waiver, the Oversight Committee must find that there are exceptional circumstances justifying the conflicted individual's participation in the review process. The statute compels Commissioner Hellerstedt's participation in the review process. The Oversight Committee should grant the proposed waiver so that CPRIT may fulfill legislative intent that the DSHS Commissioner serve as a PIC member. The proposed limitations will substantially mitigate any potential for bias.

Proposed Waiver and Limitations

In granting the waiver of the conflict of interest set forth in Section 102.106(c)(3), I recommend that the Oversight Committee permit Commissioner Hellerstedt to continue to perform the following activities and duties associated with CPRIT's review process subject to the stated limitations:

1. Attend and participate fully in the PIC meetings except that Commissioner Hellerstedt shall not participate in the PIC's discussion or vote on grant award recommendations to DSHS;
2. Have access to grant application information developed during the grant review process, except for information related to DSHS applicants, if any; and
3. Provide information to the Oversight Committee or CPRIT personnel about the grant review process and applications recommended by the PIC for grant awards, including answering questions raised by the Oversight Committee or CPRIT personnel. To the extent that Commissioner Hellerstedt provides information on his own initiative in a review cycle in which DSHS is a grant applicant, the information provided by Commissioner Hellerstedt should be general information related to the overall grant application process and not advocate specifically for a grant application submitted by DSHS.

CPRIT's statute requires the Chief Compliance Officer to attend PIC meetings to document compliance with CPRIT's rules and processes, including adherence to this limitation. The Chief Compliance Officer shall report to the Oversight Committee any violation of this waiver prior to the Oversight Committee's action on the PIC recommendations.

Important Information Regarding this Waiver and the Waiver Process

- The Oversight Committee may amend, revoke, or revise this waiver, including but not limited to the list of approved activities and duties and the limitations on duties and activities. Approval for any change to the waiver granted shall be by a vote of the Oversight Committee in an open meeting.

- CPRIT limits this waiver to the conflict of interest specified in this request. To the extent that Commissioner Hellerstedt has a conflict of interest with an application that is not the conflict identified in Section 102.106(c)(3), then Commissioner Hellerstedt will follow the required notification and recusal process.



CANCER PREVENTION & RESEARCH
INSTITUTE OF TEXAS

MEMORANDUM

To: OVERSIGHT COMMITTEE MEMBERS
From: WAYNE R. ROBERTS, CHIEF EXECUTIVE OFFICER
Subject: SECTION 102.1062 WAIVER – WILL MONTGOMERY
Date: AUGUST 8, 2018

Waiver Request and Recommendation

I request that the Oversight Committee approve a conflict of interest waiver for FY 2019 for Mr. Will Montgomery, presiding officer of the CPRIT Oversight Committee, pursuant to Health & Safety Code Section 102.1062 “Exceptional Circumstances Requiring Participation.” Mr. Montgomery’s waiver is the same as the one approved by the Oversight Committee for FY 2018. The waiver is necessary for Mr. Montgomery to fully participate in the grant award approval process. Together with the waiver’s proposed limitations, adequate protections are in place to mitigate the opportunity for factors other than merit and established criteria to affect the award of grant funds.

Background

Mr. Montgomery is a partner at Jackson Walker L.L.P., a long-time, Texas-based law firm that employs more than 350 attorneys. Mr. Montgomery’s legal practice focuses on disputes related to the financial services industry, including regulatory investigations, enforcement proceedings, and internal investigations relating to securities, options, derivatives, commodities, and futures. Mr. Montgomery does not personally represent CPRIT grant recipients; however, some lawyers employed by Jackson Walker provide legal services to the following grant applicants and grant recipients:

- Rice University
- Texas A & M University System
- Texas A & M System Technology Commercialization
- Texas A & M Institute for Biosciences & Technology
- Methodist Hospital System (Houston)
- The University of Texas Southwestern Medical Center
- The University of Texas School of Public Health
- The University of Texas Medical Branch, Galveston
- Children's Medical Center Research Institute
- The University of Texas San Antonio

- The University of Texas at Austin
- The University of Texas Health Science Center at Houston
- The University of Texas M.D. Anderson Cancer Center
- Texas Association of Nurse Anesthetists
- University General Health system
- MHMR Tarrant County
- Texas Tech University
- Texas Tech University Health Science Center
- UNT Health Science Center
- Baylor University
- Baylor College of Medicine

Health & Safety Code Section 102.106(c)(4) mandates that a professional conflict of interest exists if an Oversight Committee member represents an entity applying to receive or receiving CPRIT funds. Similarly, Texas Administrative Code Section 702.11(d) finds that there is a professional conflict of interest if an Oversight Committee member “represents in business or law an entity receiving or applying to receive money from the Institute...”

The entities listed above were clients of the law firm prior to Mr. Montgomery’s appointment to the Oversight Committee. Although Mr. Montgomery does not perform legal work for these entities or supervise anyone who does so, he has previously recused himself from participating in the grant award process related to these entities out of an abundance of caution. He does not have an economic interest in the revenues paid to Jackson Walker by these entities, aside from his position as a partner of the firm. However, Mr. Montgomery’s percentage of ownership interest in the law firm is not impacted whether these entities are clients of the firm.

It is reasonable to expect that the same conflict will affect Mr. Montgomery’s participation in more than one grant review cycle in the 2019 fiscal year as well. CPRIT’s administrative rule Section 702.17(3) authorizes the Oversight Committee to approve a waiver that applies for all activities affected by the conflict during the fiscal year.

Exceptional Circumstances Requiring Mr. Montgomery’s Participation

To approve a waiver, the Oversight Committee must find that there are exceptional circumstances justifying the conflicted individual’s participation in the review process. There are compelling reasons warranting Mr. Montgomery’s participation in the review process when he would otherwise recuse himself because of the conflict. One of the principal duties for an Oversight Committee member is to approve grant award recommendations submitted by the Program Integration Committee. The statute requires a two-thirds vote of the Oversight Committee to approve a grant award. The significant majority of CPRIT’s grant applicants and grant recipients are academic institutions, including many of the entities listed above. Excluding Mr. Montgomery from

participation in the decision-making process related to grant awards reduces the number of Oversight Committee members able to perform the critical task of reviewing information about potential grantees and the review process associated with the grant recommendations.

The proposed limitations and CPRIT's existing process and procedures will mitigate substantially any potential for bias.

Proposed Waiver and Limitations

In granting the waiver of the conflict of interest set forth in Health & Safety Code Section 102.106(c)(4), I recommend that the Oversight Committee permit Mr. Montgomery to participate in the review process for applications submitted by the following entities, subject to the limitations stated below:

- Rice University
- Texas A & M University System
- Texas A & M System Technology Commercialization
- Texas A & M Institute for Biosciences & Technology
- Methodist Hospital System (Houston)
- UT Southwestern
- UT School of Public Health
- UT Medical Branch, Galveston
- Children's Medical Center Research Institute
- UT San Antonio
- UT Austin
- UT Health Science Center at Houston
- UT M.D. Anderson Cancer Center
- Texas Association of Nurse Anesthetists
- University General Health system
- MHMR Tarrant County
- Texas Tech University
- Texas Tech University Health Science Center
- UNT Health Science Center
- Baylor University
- Baylor College of Medicine

Important Information Regarding this Waiver and the Waiver Process

- The Oversight Committee may amend, revoke, or revise this waiver. Approval for any change to the waiver granted shall be by a vote of the Oversight Committee in an open meeting.

- CPRIT limits this waiver to the conflict of interest specified in this request, Health & Safety Code Section 102.106(c)(4). To the extent that Mr. Montgomery has a conflict of interest with an application submitted by an entity listed herein that is not the conflict identified in Section 102.106(c)(4), then Mr. Montgomery will follow the required notification and recusal process.
- CPRIT limits the waiver to the entities specified in the request and based upon the circumstances stated herein. If circumstances change such that Mr. Montgomery personally represents one of the entities listed herein or supervises the work of someone representing the entity, he will notify the Chief Executive Officer and the presiding officer of the Oversight Committee.



CANCER PREVENTION & RESEARCH
INSTITUTE OF TEXAS

MEMORANDUM

TO: OVERSIGHT COMMITTEE MEMBERS
FROM: WAYNE R. ROBERTS, CHIEF EXECUTIVE OFFICER
SUBJECT: SECTION 102.1062 WAIVER – REVIEW COUNCIL MEMBERS
DATE: AUGUST 8, 2018

Waiver Request and Recommendation

I request that the Oversight Committee approve a fiscal year 2019 conflict of interest waiver for review council members pursuant to Health & Safety Code § 102.1062 “Exceptional Circumstances Requiring Participation.” Unlike other conflict of interest waivers that the Oversight Committee has approved previously, this waiver is not granted for a specific conflict of interest or person. Instead, CPRIT intends to invoke this waiver as necessary to address the unusual scenario when a review council member has a conflict with a grant application that is part of the larger group of proposals that the review panel or review council must act upon (usually to recommend for awards). The waiver is necessary for a review council member to participate in the overall discussion and vote on the slate of award recommendations. This waiver is the same waiver the Oversight Committee approved for FY 2018.

Although it would be ideal to consider each instance individually before granting the conflict of interest waiver, a prospective waiver is necessary in this scenario given the timing of the review process and scheduled Oversight Committee meetings. It is unlikely that review panel schedules will align with Oversight Committee meeting dates such that CPRIT will be able to secure a conflict of interest waiver in time for the review council member to participate in the review process. However, adequate protections are in place that, together with the waiver’s proposed limitations, mitigate the opportunity for factors other than merit and established criteria to influence review council members’ decisions regarding the award of grant funds.

Background

Health & Safety Code § 102.1062 directs the Oversight Committee to adopt administrative rules governing the waiver of the conflict of interest requirements of the statute in exceptional circumstances. CPRIT’s administrative rule § 702.17(3) authorizes the Oversight Committee to approve a waiver that applies for all activities affected by the conflict during the fiscal year. The rules require that a majority of the Oversight Committee members must vote to approve the waiver. CPRIT must report any approved waiver to the lieutenant governor, speaker of the

house of representatives, the governor, and the standing committees of each house of the legislature with primary jurisdiction over CPRIT matters.

The issue addressed by this waiver results from the role review council members play in the review process. At the review panel level, the review council member chairs the review panel meeting. Occasionally, a review council member will identify a conflict of interest with an application assigned to the member's panel. If CPRIT is unable to reassign the application to a different panel, then the review council member follows the process set forth in CPRIT's conflict of interest rules and recuses himself or herself from any discussion, scoring, deliberation, or vote on the application. The proposed waiver will not change the review council member's responsibility to disclose the conflict or to recuse from the review of the application.

The difficulty arises when the review council member must lead the discussion, in his or her role as chair of the review panel, about the group of applications the panel recommends moving forward to the review council. If the application with which the review council member is in conflict advances as part of the group that scored well enough to move forward, the review council member's participation in the discussion on the group as a whole violates the member's agreement to not participate in "any discussion" of the conflicted application.

A similar challenge arises at the review council level. If the application with which the member is in conflict is part of the group considered by the review council, the conflict of interest rules prohibit the member from participating in the review council's discussion or vote on the group of awards. The review council member is unable to address questions about other applications heard by his or her panel due to his or her recusal from the process, potentially disadvantaging the other applications.

Exceptional Circumstances Requiring the Review Council Member's Participation

In order to approve a conflict of interest waiver, the Oversight Committee must find that there are exceptional circumstances justifying the conflicted individual's participation in the review process. In this case, exceptional circumstances exist due to the necessity of the review council member's participation in the process to develop the overall award recommendation slates and the Oversight Committee should grant the proposed waiver. The limitations mitigate the potential for bias.

CPRIT's administrative rules require the Chief Compliance Officer to attend or designate an independent third party to attend peer review meetings and review council meetings when the panel discusses grant applications. The third-party observer must document that the reviewers follow CPRIT's grant review process consistently, including observing CPRIT's conflict of interest rules. The third-party observer will document any violation of this waiver in his or her written report, which CPRIT provides to the Oversight Committee prior to the vote on the award recommendations.

Proposed Waiver and Limitations

In granting the conflict of interest waiver, I recommend that CPRIT permit the review council member to continue to perform the following activities and duties associated with CPRIT's review process subject to the stated limitations:

1. The review council member must disclose any conflict in writing pursuant to the electronic grant management process CPRIT has in place.
2. The review council member must recuse himself or herself from participation in the review, discussion, scoring, deliberation, and vote on the specific grant(s) identified as the conflict.
3. When the review panel or review council takes up the grant applications as a group, the review council member may participate in the discussion and vote on the proposed awards, so long as the review council member does not advocate for or against the application that the member has identified as a conflict.
4. Whenever CPRIT invokes this waiver, the Chief Compliance Officer will provide information about the use of the waiver, including the name of the review council member and the identified conflict, in the Chief Compliance Officer's Certification report. I will also include this information in the CEO affidavit I submit for the grant award mechanism.

Due to the nature of the conflict or the type of review process, this conflict of interest waiver will not apply to following:

- When the review council member's conflict of interest is a conflict described by T.A.C. § 702.13(c); or
- When the review council is acting as the only review panel in the review process (e.g. CPRIT recruitment awards and prevention dissemination awards.)

Important Information Regarding this Waiver and the Waiver Process

- The Oversight Committee may amend, revoke, or revise this waiver, including but not limited to the list of approved activities and duties and the limitations on duties and activities. Approval for any change to the waiver granted shall be by a vote of the Oversight Committee in an open meeting.
- CPRIT limits this waiver to review council members operating under the circumstances specified in this request.